



Master Plan Summary

The Master Plan consists of 5 key components:

- Each individual Primary Service Area, Regional and Area Delivery plans, Regional Plan
 - Visiting Professional Summary Plan
 - Contract Health Summary
 - Direct Care Services Distribution Plan
- And
- Master Plan Priorities

These items document the plan, services and resource allocations developed over the course of our effort and conversations. Also documented within the Master Plan Summary are the Regional Referral and Area Referral Delivery Plans. Each of these components has their own purpose and is integral to understanding the complete Master Plan requirements for the Phoenix Area.

The **Primary Service Area Delivery plan** is the basis and starting point of the Master Plan. This information specifically reflects the requirements and desires of your Primary Service Area.

A Primary Service Area (PSA) is defined as a logical grouping of communities based on proximity for which health care resources are planned and distributed. Initially and primarily your resources are responsible for the basic primary care of these communities. The size of the population in these communities may allow you to offer more than basic primary care. Each individual PSA delivery plan is based on conversations with IHS and or tribal leadership from that Service Area. A medical workload and key characteristics need projection to the year 2010 was provided based on the projected 2010 user population. This information was reviewed and discussed in order to determine the best care delivery options for the local users. Local direct care, visiting direct care professionals, local contract care and regional direct care options were considered. Once the delivery options were determined, resource requirements and priorities at the local level were determined.

As a result of the Primary Service Area decisions, the Contract Health Summary, the Visiting Professional Summary and Regional Services can be considered.

The **Regional Referral Delivery Plan** does the same thing at a Regional level that the PSA documentation does at a local level. It considers the delivery options for services that the PSA leadership felt were acceptable at the Regional level. ***Regional Service Areas were defined as a grouping of PSAs, within a two-hour radius drive of a natural market center or meeting point, whose common interest is to share health care resources to improve access to all.*** The Regional Delivery Plan documents the services and delivery options at the region that were discussed by the local participants. It is only at this time that the Area Delivery Plan can be considered with its referrals from the Region. These discussions are documented in the **Area Referral Delivery Plan**.

The **Contract Health Summary** is a direct result of the PSA Delivery Plan. The amount of contract health dollars required for a community is based on service-by-service affordability of direct care and the availability of local contracting options. For example, a service area with out local contracting options is more likely to be interested in the synergies of regional care then a community with a non-IHS or tribal facility across the street. This reality was discussed at the PSA levels by service. If contract health dollars for a service was determined most desirable for a PSA, that service's workload multiplied by a cost per workload was included in the lump sum total Contract Health Dollars for a

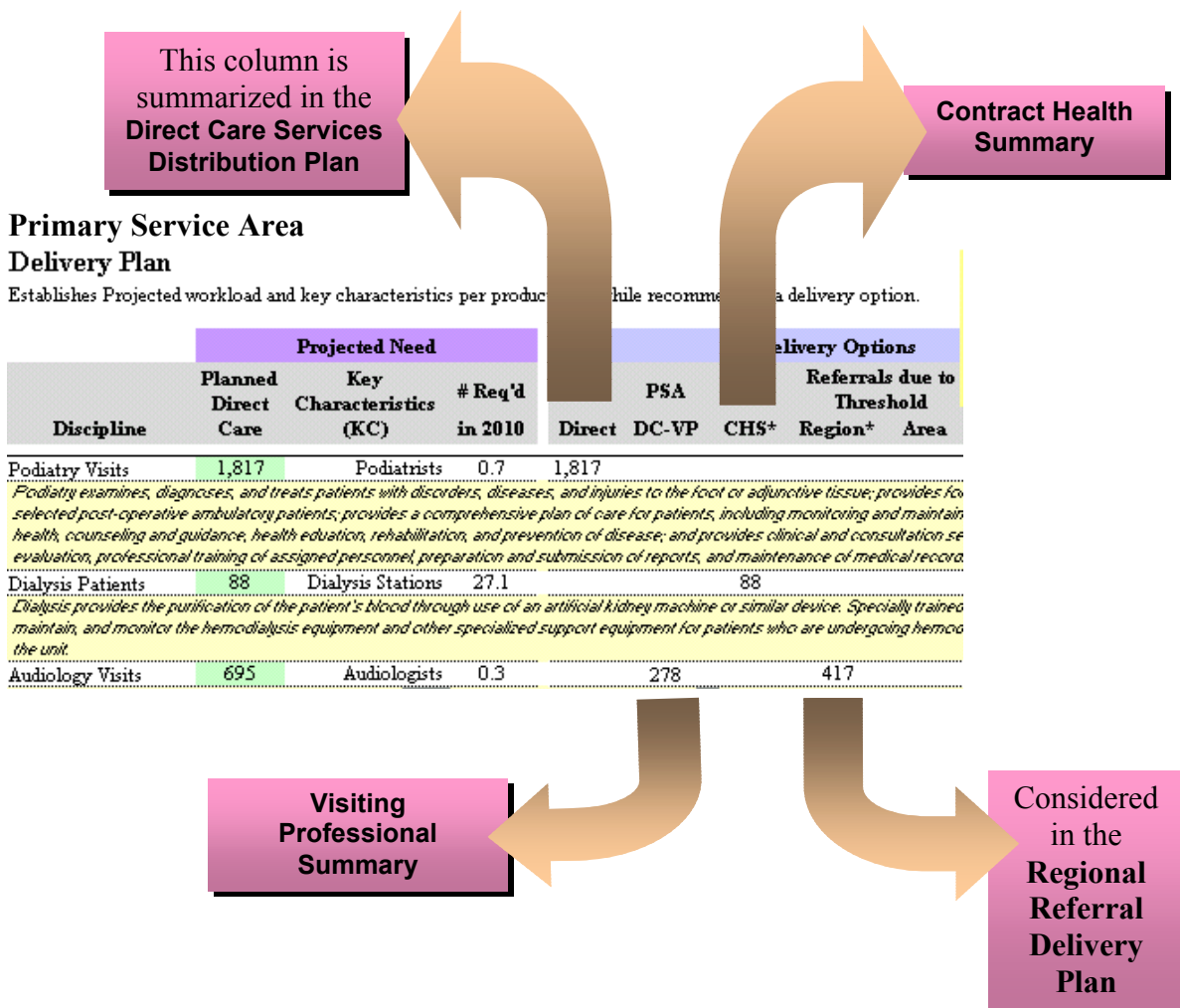




Service Area. Simply dividing that total dollar requirement by the PSA User Population provides us with a planning number of CHS dollars per User specific to that PSA.

The **Visiting Professional Summary** is also a result of the PSA conversations. In those discussions, certain services delivery options, typically physician specialist, were determined to be a visiting specialist. For example, Parker's population supports an Orthopedic physician at approximately 40% productivity. Rather than employ this physician locally, Parker prefers to have the physician visit their facility once per week as a visiting professional. Summarizing these requests provide the Area a picture of the number of assets they need to support these visiting specialist requirements.

The **Direct Care Services Distribution Plan** is a summary and abbreviation of the services offered and supported at an Area Wide Basis, at a Regional Level and at your local Primary Service Area. This document is a result of the PSA, Region and Area Delivery conversations. Tied together with the regional referral map a clear-cut picture of distributed services anticipated in 2010 is possible.





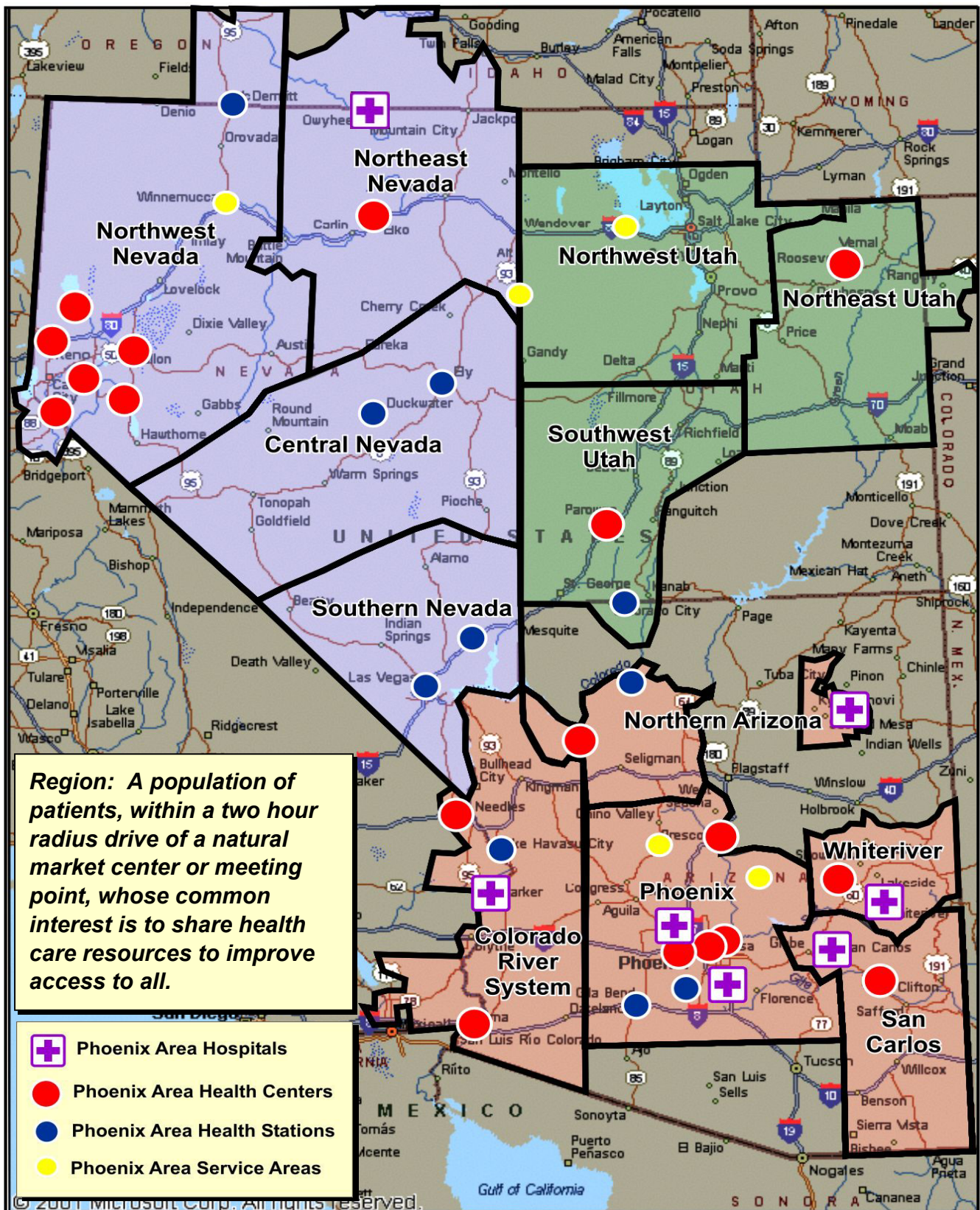
All master plans need to have a statement of priority. While each PSA has a developed set of priorities within their Service Area, the group as a whole needs to establish a priority system for all the needs of the Area. In order to establish a group think system for priorities, through a series of brainstorming sessions, the group established four criteria for priorities: Health, Access, Resources and Patient Payor Profile. The group also established 3 factors to measure each of these criteria. By ballot weighting the criteria and the factors, a mathematical priority system is established and explained in the **Master Plan Priorities** section of the Master Plan Summary.

Direct Care Services Distribution Plan

The following two pages provide a holistic view of the direct care services and their distribution in the year 2010. The left hand page indicates the location of each of the Phoenix Area service areas and the type of facility anticipated in 2010. The map also indicates the 12 Regions of Care determined from our Regional Analysis. The Regions of Care are not intended to change IHS Service Unit boundaries and in many ways already reflect today's referral pattern. The right page is the Direct Care Services Distribution Plan

The **Direct Care Services Distribution Plan** is a summary and abbreviation of the services offered and supported at an Area Wide Basis, at a Regional Level and at your local Primary Service Area. This document is a result of the PSA, Region and Area Delivery Plans. The document is organized by state by region and by PSA. New services anticipated in the plan are highlighted in yellow. Detailed resources and fully outlined anticipated services are found in the individual PSA documents.







PSA Services	Nevada																Utah																							
	*User Population mandates separate User vs. Service Population Study.		*Health Station not individually quantified as part of this study.		EMS Primary Care Dental Care Visiting Providers -Int. Medicine -Pediatric -OB/GYN Nutrition Optometry -Psychiatry Public Health Nurs. -Health Education Pharmacy Telemedicine Case Management Contract Health Transportation	Public Health Nurs. Nutrition Health Education Traditional Healers Primary Care -Int. Medicine -Pediatric -OB/GYN Dental Care Optometry Spec. Collection Pharmacy Physical Therapy Telemedicine Case Management Contract Health	Public Health Nurs. Nutrition Health Education Traditional Healers Primary Care -Int. Medicine -Pediatric -OB/GYN Dental Care Optometry Spec. Collection Pharmacy Telemedicine Case Management Contract Health	Public Health Nurs. Nutrition Health Education Traditional Healers Primary Care -Int. Medicine -Pediatric -OB/GYN Dental Care Optometry Spec. Collection Pharmacy Telemedicine Case Management Contract Health				Nutrition Visiting Providers -Primary Care -Audiology OB/GYN -Podiatry -Pharmacy -PHN -Mental Health CHR Case Management Specimen Collection Transportation Contract Health			Nutrition Visiting Providers -Primary Care -Audiology OB/GYN -Podiatry Cardiology Neurology Optometry Clinical Lab Pharmacy Physical Therapy Psychiatry Pharmacy Telemedicine Case Management Transportation	Preventive Care Primary Care Dental Care Visiting Providers -Int. Medicine -Pediatric -OB/GYN -Optometry -Podiatry Cardiology Neurology Optometry Clinical Lab Pharmacy Physical Therapy Psychiatry Pharmacy Telemedicine Case Management Transportation			Preventive Care Primary Care Visiting Providers -Int. Medicine -Pediatric OB/GYN Gastroenterology Podiatry Audiology Dental Care Optometry Clinical Lab Pharmacy Radiography Physical Therapy Telemedicine Contract Health	Public Health Nurs. Nutrition Health Education Dental Care Primary Care Visiting Providers -OB/Gyn -Allergy -Rheumatology -Podiatry Pharmacy Dental Health	*Health Station not individually quantified as part of this study.	*Supported by PITU																		
	HS - (1,418)	HS - (432)	HC - (930)	HC - (4,157)	HC - (3,201)	HC - (1,973)	HC - (2,263)	HC - (1,111)	HS - (698)	Winnemucca	Tonopah	HS - (374)	HS - (189)	Telemicine	H - (2,148)	HC - (2,855)	Goshute	Skull Valley	Salt Lk. City	HC - (5,813)	HC - (2,101)	Kaibab	HS - (127)																	
	Las Vegas	Moapa	Yerington	Reno Sparks	Washoe	Pyramid Lake	Fallon	Walker River	McDermitt			Elv	Duckwater	Duck Valle y	Elko					Ft. Duchesne	PITU																			
	Southern Nevada - (1,850)		Northwest Nevada - (14,567)														Central Nevada - (612)				Northeast Nevada - (5,003)		Northwest Utah - (159)		Ft. Duchesne Northeast Utah (5,813)		Southwest Utah - (2,228)													
Low User Population eliminates potential synergies		Internal Medicine Pediatrics OB/GYN Psychiatry Transportation Allergy				Information Management Nursing Home Sub-Acute / Transitional Care Visiting Specialty Clinic Podiatry Audiology			Property and Supply Clinical Lab Mobile Screeing Mammography Clinical Engineering SA - RTF WIC			Dialysis Epidemiologist Facility Management		Public Health Nursing Nutrition		Low User Population eliminates potential synergies		Low User Population eliminates potential synergies		Case Management SA-RTF		Case Management Contract Health Telemedicine																		
		Ophthalmology Dermatology ENT		Urology Neurology Allergy		Cardiology		Epidemiology Multi-Facility Integration Hostel Tele-Radiology Support																																
		Transportation Psychiatric IP Medical Detox Acute Dialysis Tele-Health Support Urology Neurology Cardiology Allergy Gastroenterology																																						
Area Wide Services																																								
Regional Services																																								
PSA Services	Medical Inpatient																SA-RTF Ophthalmology Level II Nursery Anatomical Pathology				MRI Nuclear Medicine Speech Therapy Clinical Engineering		ENT Environmental Health Mobile Mammography		Orthopedics Low Risk Birthing Ped/Med Inpatient Surgical Inpatient Ultrasound Mammography Flourosocopy radiography		Orthopedics Low Risk Birthing Ped/Med Inpatient S Surgical Inpatient Ultrasound Mammography Audiology SA-RTF CT		Orthopedics Surgery Med Inpatient Surgical Inpatient		*Requires Partnering with Navajo to solidify concept									
	Colorado River System - (10,160)																Phoenix - (92,131)																San Carlos - (12,648)		Whiteriver - (16,889)		Northern Arizona - (14,479)			
	Ft. Yuma HC - (4,297)	Ft. Mohave HC - (1,465)	Parker H - (4,133) Preventive Care Primary Care Emergency Dental Optometry Podiatry -General Surgery -ENT -Gastroenterology -Allergy -Audiology Podiatry Clinical Lab Pharmacy Radiography Physical Therapy Telemedicine Case Management Transportation Mental Health	Chemehuevi HS - (265) Primary Care Emergency Dental Optometry Podiatry -Surgical Spec. -Medical Spec. -Pediatric Spec. Rad/Flourosocpy Ultrasound Clinical Lab Pharmacy Physical Therapy Ped/Medical IP Case Management EMS Mental Health		Middle Verde HC - (2,000) PH Nursing Primary Care Nutrition Visiting Providers -Int. Medicine -Pediatric -OB/Gyn -Optometry -Podiatry -Psychiatry -Health Education Primary Care Dental Specimen Collect. Pharmacy Case Management Contract Health Mental Health Transportation	Pavson SA - (154)	Prescott SA - (499) Primary Care Emergency Orthopedics Visiting Providers -Family Practice -OB/GYN -Pharmacy -Nutrition -Optometry -Podiatry -Psychiatry -Dental -Podiatry -Psychiatry Mental Health CHR Case Management Transportation Occup. Therapy	Phoenix H - (57,191) Preventive Care Primary Care Emergency General Surgery Imaging Dental Optometry Podiatry Audiology Physical Therapy Outpatient Surgery Labor & Delivery Ped/Medical IP Surgical Inpatient Case Management Transportation Occup. Therapy	San Lucy HS - (850) Public Health Nurs. Visiting Providers -Obstetrics -Family Practice -OB/GYN -Pharmacy -Nutrition -Optometry -Dental -Podiatry -Psychiatry Mental Health CHR Transportation Case Management EMS *Supported by Phoenix	Salt River HC - (6,526) Public Health Nurs. Nutrition Health Education Primary Care Visiting Providers -Ophthalmology -ENT -Dermatology Audiology Dental Care Optometry Podiatry Clinical Lab Pharmacy Physical Therapy Case Management Contract Health Transportation Mental Health Dialysis	Ft. McDowell HC - (989) Public Health Nurs. Nutrition Health Education Dental Care Primary Care Visiting Providers -Optometry Pharmacy Case Management EMS Transportation	Ak-Chin HS - (659) Primary Care Emergency Ophthalmology Visiting Providers -ObGyn - General Surgery - Orthopedics Mental Health Audiology Optometry Imaging Clinical Lab Pharmacy Physical Therapy Medical Inpatient Endoscopy Case Management EMS Home Health Care	Hu-Hu-Kam H - (16,655) Preventive Care Primary Care Emergency Ophthalmology Visiting Providers - ObGyn - General Surgery - Orthopedics Mental Health Audiology Optometry Imaging Clinical Lab Pharmacy Physical Therapy Contract Health Medical Inpatient Endoscopy Case Management EMS Home Health Care	West End HC - (6,608) Public Health Nurs. Nutrition Health Education Primary Care Visiting Providers -Int. Medicine -OB/GYN Dental Care Optometry Podiatry Clinical Lab Pharmacy Physical Therapy Case Management Contract Health EMS Transportation	Bylas HC - (2,625) Public Health Nurs. Nutrition Health Education Primary Care Visiting Providers -Pediatric -OB/GYN -Podiatry Optometry Pharmacy Physical Therapy Case Management Contract Health EMS Mental Health	San Carlos H - (10,023) Preventive Care Primary Care Dental Podiatry Optometry Pharmacy Physical Therapy Mental Health Visiting Providers -Ophthalmology -ENT -Cardiology -Urology -Neurology -Allergy -Pulmonary -Rheumatology -Oncology -Pediatrics/Genetics Case Management EMS & Transport.	San Carlos HC - (1,894) Public Health Nurs. Nutrition Health Education Primary Care Optometry Pharmacy Physical Therapy -Int. Medicine -OB/GYN -Optometry -Ultrasonnd -Orthopedics -Dental Care Telemedicine EMS	Whiteriver H - (14,995) Preventive Care Primary Care Dental Podiatry Optometry Pharmacy Physical Therapy Mental Health Visiting Providers -Ophthalmology -ENT -Urology -Neurology -General Surgery -Physical Therapy Dental	Hopi H - (10,824) Preventive Care Primary Care Emergency Dental Optometry Podiatry Allergy -Oncology -Podiatry Clinical Lab Low-Risk Birth Holding Beds Imaging Physical Therapy Case Management EMS Telemedicine	Peach Springs HC - (3,084) Preventive Care Primary Care Visiting Providers -Int. Medicine -Pediatric -OB/GYN -Audiology -General Surgery -Orthopedics -Optometry -Podiatry Dental Care Clinical Lab Pharmacy Physical Therapy Telemedicine Case Management EMS & Transport.	Supai HS - (571)																		
	Arizona																																							

Intentionally Blank



Visiting Professional Summary Plan

The Visiting Professional Summary Sheet indicates the number of visiting professionals needed by Primary Service Area, Regional Center, Region overall and Area wide by Specialty. It is simply a rollup of the individual PSA's and Region's Delivery Plan and provides the Area a solid blueprint for planning for the professional needs of the organization in 2010. Each figure in a column reflects the number of provider FTE required at a location or region to meet the delivery plan request of that location.

Distribution of Visiting Providers can be accomplished by Region, State or Area-wide. From a system stability and provider retention approach, the system should contract for provider specialist not having adequate demand for more than two FTEs.

The PSA Resource Allocation tables reflect whether Visiting Professionals are planned to be housed at a specific location. Generally the intent is for Bylas and Cibecue's Visiting Professionals to be housed at San Carlos and White River respectively. All Visiting Professionals in the state of Nevada to be housed in the Reno Regional Center. Visiting Professionals demand in the state of Utah and the remainder of Arizona will be met with PIMC stationed professionals. Eventually with the cooperation of the Navajo Flagstaff population the establishment of a Northern Arizona Regional Center would move their visiting professionals to that Center.

The FTE demand for visiting professionals translates differently into outpatient clinic time depending on the specialty. Some specialists spend the majority of their outpatient time in the clinic, while other professionals spend more time in the inpatient or surgical settings. For example, a .2 FTE pediatrician translates into 1 clinic day per week, while .2 General Surgeon translates into 1 clinic day per two weeks. The following table outlines clinic time by FTE percentage (.2 = 20%) by specialty.

FTE Quantity or Utilization Percentage	Visiting Professionals	
	Family Practice, Pediatrics, Internal Medicine, Dermatology, Neurology, Allergy, Gerontology, Rheumatology, Oncology, Pediatric Genetics, Nephrology, Nutrition, Optometry, Podiatry, Audiology, all Behavioral Health professionals and all Preventive Care professionals	Ob/Gyn, Orthopedics, Ophthalmology, General Surgery, Otolaryngology, Cardiology, Urology, Pulmonology, Gastroenterology
.1 = 10%	1 day per two weeks	1 day per two weeks
.2 = 20%	1 day per 1 week	1 day per 1 week
.3 = 30%	1.5 days per week	1.5 days per week
.4 = 40%	2 days per week	2 days per week
.5 = 50%	2.5 days per week	2.5 days per week
.6 = 60%	3 days per week	3 days per week
.8 = 80%	4 days per week	4 days per week



Intentionally Blank



Discipline	Whiteriver			San Carlos			Phoenix							Northern Arizona				Colorado River System				Southwest Utah		Northeast Utah		PIMC Based	Northwestern Nevada							Northeastern Nevada			Central Nevada			Reno Based	Grand Total: Number of Key Characteristics Required										
	Whiteriver	Cibecue	# of KC Req'd	San Carlos	Bylas	# of KC Req'd	Ft McDowell	West End	Hu-Hu-Kam	Middle Verde	Phoenix	Salt River	Phoenix Region	# of KC Req'd	Keams Canyon	Peach Spring	Northern Arizona Region	# of KC Req'd	Ft. Yuma	Parker	Colorado River Region	# of KC Req'd	PITU	# of KC Req'd	Ft. Duchane	# of KC Req'd	Visiting Professionals	Fallon	Pyramid Lake	Reno Sparks	Walker river	Washoe	Yerington	Northwestern Nevada Region	# of KC Req'd	Elko	Owyhee	# of KC Req'd	Duckwater	Ely		# of KC Req'd	Visiting Professionals								
Primary Care (Provider Visits)	<div>Supported by Whiteriver</div>			<div>Supported by San Carlos</div>																																															
Family Practice	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	0.2	0.2	0.2	0.2	0.2								
Internal Medicine	0.0	0.2	0.2	0.0	0.3	0.3	0.0	0.7	0.0	0.2	0.0	0.0	0.9	0.0	0.3		0.3	0.0	0.4		0.4	0.0	0.0	0.0	0.0	0.0	1.6	0.2	0.2	0.4	0.0	0.4	0.1	1.3	0.3	0.0	0.3	0.0	0.0	0.0	1.6	3.3									
Pediatric	0.0	0.3	0.3	0.0	0.4	0.4	0.0	0.0	0.0	0.2	0.0	0.0	0.2	0.0	0.4		0.4	0.0	0.0		0.0																														

Intentionally Blank



Contract Health Summary

The Contract Health Summary Sheet indicates a relative breakdown of contract health reliance by Service Area. The Contract Health \$s stated on the facing page is a sum total required by Service Area in accordance with their PSA Delivery Plan. The Fiscal Intermediary (FI) for the Phoenix Area provided costs per workload as an average for the entire Area. These average costs are displayed in the Contract Health Columns of the PSA Resource Allocation tables. The same costs are used for all Service Areas and local economies, competitive alternative care and the local employment and health insurance situation do affect the actual costs required of the Contract Health System. However the rollup to the right does indicate the greater reliance of the smaller communities on Contract Health when the CHS \$ per User population is considered.

There are a number of Service Areas that were not included in the study. Correlating these communities with studied communities of similar size will likely provide a solid indication of CHS \$ required per User population.

Note: The FI has taken two passes at these numbers, with the second numbers being slightly lower. The new numbers were provided Friday, April 12th. The cost per Mental Health and Podiatry Visit still raises questions as to the accuracy of the numbers. However the consistent projection of these numbers does provide a fair relative distribution of CHS funding determined by the planned reliance on CHS for services.





Contract Health Dollars Per 2010 User Population

State	Primary Service Area (PSA)	2010 Contract Health Dollars	2010 User Pop	2010 CHS \$ / User Pop	% of User Population	% of CHS \$
Arizona	Phoenix	\$17,082,817	56,341	\$303	32.96%	16.03%
Arizona	Hu-Hu-Kam	\$8,941,098	15,996	\$559	9.36%	8.39%
Arizona	Whiteriver	\$6,827,365	14,995	\$455	8.77%	6.41%
Arizona	Keams Canyon	\$4,691,861	10,824	\$433	6.33%	4.40%
Arizona	San Carlos	\$4,031,927	10,244	\$394	5.99%	3.78%
Arizona	West End	\$2,346,315	6,608	\$355	3.87%	2.20%
Arizona	Salt River	\$2,230,994	6,526	\$342	3.82%	2.09%
Utah	Ft. Duchesne	\$5,788,786	5,813	\$996	3.40%	5.43%
Arizona	Ft. Yuma	\$3,873,761	4,205	\$921	2.46%	3.63%
Nevada	Reno/Sparks	\$3,614,971	4,157	\$870	2.43%	3.39%
Arizona	Parker	\$3,332,734	3,868	\$862	2.26%	3.13%
Nevada	Washoe	\$1,683,825	3,201	\$526	1.87%	1.58%
Arizona	Peach Springs	\$1,823,714	2,513	\$726	1.47%	1.71%
Arizona	Bylas	\$744,969	2,291	\$325	1.34%	0.70%
Nevada	Fallon	\$2,196,425	2,263	\$971	1.32%	2.06%
Nevada	Elko	\$4,614,505	2,201	\$2,097	1.29%	4.33%
Nevada	Duck Valley	\$2,205,963	2,150	\$1,026	1.26%	2.07%
Nevada	Pyramid Lake	\$2,953,795	1,973	\$1,497	1.15%	2.77%
Arizona	Cibecue	\$869,125	1,894	\$459	1.11%	0.82%
Arizona	Ft. Mohave	Not Studied	1,465	NA	0.86%	NA
Nevada	Las Vegas	Not Studied	1,418	NA	0.83%	NA
Nevada	Walker River	\$1,344,804	1,244	\$1,081	0.73%	1.26%
Arizona	Ft. McDowell	\$1,030,503	989	\$1,042	0.58%	0.97%
Nevada	Yerington	\$1,191,416	930	\$1,281	0.54%	1.12%
Utah	PITU	\$3,978,817	896	\$4,441	0.52%	3.73%
Arizona	San Lucy	\$278,617	850	\$328	0.50%	0.26%
Arizona	Middle Verde	\$1,212,344	734	\$1,652	0.43%	1.14%
Nevada	McDermitt	Not Studied	698	NA	0.41%	NA
Arizona	Ak-Chin	\$8,941,098	659	\$13,568	0.39%	8.39%
Arizona	Supai	Not Studied	571	NA	0.33%	NA
Arizona	Prescott	Not Studied	499	NA	0.29%	NA
Nevada	Moapa	Not Studied	432	NA	0.25%	NA
Nevada	Ely	\$981,690	374	\$2,625	0.22%	0.92%
Arizona	Chemehuevi	\$3,332,734	265	\$12,576	0.16%	3.13%
Nevada	Winnemucca	Not Studied	234	NA	0.14%	NA
Arizona	Payson	Not Studied	154	NA	0.09%	NA
Nevada	Duckwater	\$445,742	154	\$2,894	0.09%	0.42%
Arizona	Kaibab	\$3,978,817	127	\$31,329	0.07%	3.73%
Nevada	Goshute	Not Studied	126	NA	0.07%	NA
Utah	Skull Valley	Not Studied	33	NA	0.02%	NA





Regional Referral Delivery Plans

The Regional Referral Requirements and Delivery Plans identify workload referred from a Primary Service Area (PSA) to a Region for delivery options considerations. Referral to the Region means the workload has already been considered for delivery at the PSA Level. Referral to the Region implies that the contributing PSA believes it is not likely to be provided at the local facility and would rather have the need be met by a Regional Area Direct Care Facility then by the Contract Health System and its dollars. It may also imply that traveling to a Direct Care provider will be just as easy as traveling to a Contract Health provider. Historically the Regional Direct Care Facility has not existed in the IHS system. Thus where Regional Services are desired and appear possible decisions concerning where they will be located will have to be made.

The spreadsheet that follows identifies referred workload by PSA and product line. The referred workload is summed in the "Total" column in the center of the page. The number of Key Characteristics required to meet that workload is identified. The Delivery Options indicates whether the Tribes and Service Units after consideration of the information provided desires that the workload be met by a Regional Direct Care Solution, a Regional Visiting Professional, contract health dollars back at a Primary Service Area level or contributed to the Area for consideration.

Although there are 12 regions identified in the Phoenix Area, there are only 4 regional spreadsheets that follow. They are;

- Northwest Nevada
- Colorado River Region
- Phoenix
- Northern Arizona

The following four regions are accounted for by that regions primary facility, whose planned population encompasses the entire regions population.

- San Carlos
- White River
- Northeast Utah - Fort Duchesne
- South West Utah – Paiute Indian Tribes of Utah (PITU)

The following four regions are not included for the reasons indicated.

- Northeast Nevada – Distance between partners eliminates regional synergies
- Southern Nevada – Moapa not individually quantified in study, Las Vegas urban population requires separate study.
- Northwest Utah – Goshute, Skull Valley not individually quantified in study, Salt Lake City urban population requires separate study. Planning for the Salt Lake City urban population will likely reduce the workload at Fort Duchesne.
- Central Nevada – Individual Plans for Ely and Duckwater, low user population eliminates potentials of regional synergies.

The Direct Care Service results of the Regional Analysis and conversations are documented on the Direct Care Service Distribution Plan. The solutions vary from the Northern Arizona region identifying real opportunity if partnership with the Navajo community of Flagstaff can be achieved, to Yuma referring to Parker for limited medical bed requirements, to a Specialty Care/Nursing Home and Support Center located in the Northwestern Nevada Regional Center Campus that offers Specialty Care, Elder and Transitional Care, Support Services as well as a base for Visiting Professionals for the entire state of Nevada.



Intentionally Blank



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

Northwestern Nevada

Regional Population

14,567

	Referred Service Area Workload									Delivery Options			* All workload referred for consideration at the Area CHS level was re-assigned to a CHS Delivery Option at the PSA level.	
Discipline	Reno/Sparks	Washoe	Fallon	Yerington	Pyramid Lake	Walker River	Total	Key Characteristics	Number Required	Region	Area	Other Options or Remarks		
										Direct	DC-VP	CHS*	Referral	
Emergency Care														
The Emergency Medical Clinic provides emergency care, diagnostic services, treatment, surgical procedures, and proper medical disposition of an emergency nature to patients who present themselves to the service. It refers patients to specialty clinics and admits patients as needed; provides clinical consultation services and professional training of assigned personnel; supports mass casualty and fire drills; and prepares reports.														
Emergency	0	0	0	0	0	0	0	Patient Spaces	0.0	0				
Specialty Care														
Specialty Care examines, diagnoses, and treats diseases and injuries requiring specialized capabilities diagnosis and procedures beyond the Primary Care team. The service is typically provided by visiting providers who have established clinic hours for consistent referral patterns.														
Orthopedics	766	595	420	0	367	203	2,351	Providers	0.9	2,351	Rheumatology Sub-Specialty			
Ophthalmology	464	425	301	0	238	151	1,579	Providers	0.4	1,579				
Dermatology	593	466	332	0	286	159	1,837	Providers	0.5	1,837				
General Surgery	576	458	324	0	278	157	1,794	Providers	0.7	1,794				
Otolaryngology	357	279	198	0	171	109	1,115	Providers	0.4	1,115				
Cardiology	132	132	91	0	70	47	473	Providers	0.2	473				
Urology	175	155	109	0	88	55	582	Providers	0.2	582				
Neurology	160	126	89	0	77	43	495	Providers	0.3	495				
Other Subspecialties	0	0	0	0	0	0	0	Providers	0.0					
Nephrology	0	0	0	0	0	0	0	Providers	0.0					
Allergy	0	0	0	0	0	0	0	Providers	0.0	0	Should provide clinic visits within region - to their facilities			
Pulmonology	0	0	0	0	0	0	0	Providers	0.0					
Gerontology	0	0	0	0	0	0	0	Providers	0.0	Internal Medicine Provider w/Gerontology Subspecialist				
Gastroenterology	0	0	0	0	0	0	0	Providers	0.0					
Rheumatology	0	0	0	0	0	0	0	Providers	0.0	Internal Medicine Provider w/Gerontology Subspecialist				
Oncology	0	0	0	0	0	0	0	Providers	0.0					
Pediatric-Genetics	0	0	0	0	0	0	0	Providers	0.0					
Traditional Healing	0	0	0	0	0	0	0	Providers	0.0					
Specialty Care Sub-Total	3,225	2,635	1,865	0	1,577	924	10,225	Exam Rooms	4.3					
Other Ambulatory Care Services														
Podiatry Visits	260	127	99	0	176	175	837	Podiatrists	0.3	837				
Podiatry examines, diagnoses, and treats patients with disorders, diseases, and injuries to the foot or adjunctive tissue; provides follow-up care for selected post-operative ambulatory patients; provides a comprehensive plan of care for patients, including monitoring and maintaining their state of health, counseling and guidance, health education, rehabilitation, and prevention of disease; and provides clinical and consultation services, medical care evaluation, professional training of assigned personnel, preparation and submission of reports, and maintenance of medical records.														
Dialysis Patients	0	12	0	0	4	0	16	Dialysis Stations	4.9	Should be collectively supported at regional level via partnership				
Dialysis provides the purification of the patient's blood through use of an artificial kidney machine or similar device. Specially trained personnel operate, maintain, and monitor the hemodialysis equipment and other specialized support equipment for patients who are undergoing hemodialysis treatment in the unit.														
Audiology Visits	440	367	251	109	211	132	1,510	Audiologists	0.8	1,510				
The Audiology Clinic provides comprehensive audiologic support for patients for the determination of etiology, pathology, and magnitude of hearing loss and potential for remediation and rehabilitation; assists in the evaluation of auditory and vestibular systems. Specific services include pure tone threshold audiometry; basic and advanced clinical testing; pediatric evaluations; neonatal hearing testing as part of the early hearing loss identification program; hearing aid evaluation, fittings, and repairs; ear mold fittings; vestibular evaluations, dispensing of hearing protection devices (fitting, education, and motivation); determination of proper referral and disposition.														
Inpatient Care														
Labor & Delivery Births	0	0	0	0	0	0	0	LDRs	0.0	0	Contract at PSA Level			
Obstetrics Patient Days	0	0	0	0	0	0	0	# of Beds	0.0	0	Contract at PSA Level			
Obstetrics provides for specialized care, treatment, and consultative evaluation to eligible inpatients; provides antepartum, delivery, and postpartum care to maternity patients; and has responsibility for the operation and maintenance of the labor and delivery suite. The labor and delivery suite provides labor and delivery care by specially trained personnel to eligible patients, including prenatal care during labor, assistance during delivery, post-natal care, and minor gynecological surgery, if it is performed in the suite. Additional activities may include preparing sterile set-ups for deliveries; preparing patients for transportation to the delivery suite and the post-anesthesia.														
Neonatology Patient Days	0	0	0	0	0	0	0	# of Bassinets	0.0	0	Contract at PSA Level			
The Newborn Nursery provides specialized inpatient care, treatment, and consultative evaluation of newborn infants; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of the newborn, including those born prematurely; and provides for, or otherwise ensures, appropriate diagnostic evaluation and care of all inpatient in the neonatal age group; prepares medical records; and submits required reports.														
Pediatric Patient Days	0	76	0	0	0	0	76	# of Beds	1.0	76	Contract at PSA Level			
Pediatric Care provides specialized inpatient care, treatment, and consultative evaluation of infants, children, and adolescents; maintains close liaison with the other professional services; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of eligible patients; prepares medical records; and submits required reports.														

Intentionally Blank



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

Northwestern Nevada

Regional Population

14,567

	Referred Service Area Workload									Delivery Options					* All workload referred for consideration at the Area CHS level was re-assigned to a CHS Delivery Option at the PSA level.
Discipline	Reno/Sparks	Washoe	Fallon	Yerington	Pyramid Lake	Walker River	Total	Key Characteristics	Number Required	Region			Area Referral	Other Options or Remarks	
										Direct	DC-VP	CHS*			
Adult Medical Acute Care															
Medical Care provides inpatient care and consultative evaluation in the medical specialties and subspecialties described in this section; coordinates healthcare delivery relative to the examination, diagnosis, treatment and proper disposition of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the medical care function will vary according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies.															
Cardiology	0	70	0	0	0	0	70	# of Beds	0.0			70		Contract at PSA Level	
Endocrinology	0	16	0	0	0	0	16	# of Beds	0.0			16			
Gastroenterology	0	57	0	0	0	0	57	# of Beds	0.1			57			
General Medicine	0	63	0	0	0	0	63	# of Beds	0.0			63			
Hematology	0	5	0	0	0	0	5	# of Beds	0.0			5			
Nephrology	0	15	0	0	0	0	15	# of Beds	0.5			15			
Neurology	0	34	0	0	0	0	34	# of Beds	0.0			34			
Oncology	0	8	0	0	0	0	8	# of Beds	0.0			8			
Pulmonary	0	77	0	0	0	0	77	# of Beds	0.0			77			
Rheumatology	0	3	0	0	0	0	3	# of Beds	0.0			3			
Unknown	0	6	0	0	0	0	6	# of Beds	0.1			6			
Medical Patient Day Total	0	353	0	0	0	0	353		0.5						
Adult Surgical Acute Care															
Surgical Care provides inpatient care and consultative evaluation in the surgical specialties and subspecialties described in this subsection; coordinates healthcare delivery relative to the examination, treatment, diagnosis, and proper dispositiion of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the surgical care function varies according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies.															
Dentistry	0	2	0	0	0	0	2	# of Beds	0.3			2			
Dermatology	0	2	0	0	0	0	2	# of Beds	0.0			2			
General Surgery	0	82	0	0	0	0	82	# of Beds	0.0			82			
Gynecology	0	23	0	0	0	0	23	# of Beds	0.0			23			
Neurosurgery	0	10	0	0	0	0	10	# of Beds	0.1			10			
Ophthalmology	0	0	0	0	0	0	0	# of Beds	1.0			0			
Orthopedics	0	64	0	0	0	0	64	# of Beds	0.5			64			
Otolaryngology	0	4	0	0	0	0	4	# of Beds	0.0			4			
Thoracic Surgery	0	2	0	0	0	0	2	# of Beds	0.1			2			
Urology	0	8	0	0	0	0	8	# of Beds	0.0			8			
Vascular Surgery	0	12	0	0	0	0	12	# of Beds	0.1			12			
Surgical Patient Day Total	0	210	0	0	0	0	210		1.0	0	0	210	0		
Intensive Care Unit	0	114	0	0	0	0	114	# of Beds	0.4			114			
Intensive Care Units (ICUs) provide treatment for patients who require intensified, comprehensive observation and care because of shock, trauma, or other life-threatening conditions. They are staffed with specially trained personnel and contain monitoring equipment and other specialized support equipment for treating .															
Psychiatry Patient Days	0	18	0	0	0	0	18	# of Beds	0.1			18			
Psychiatric Care provides specialized care and consultative evaluation for eligible inpatients; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of patients with psychotic, neurotic, or other mental disorders; maintains protective custody of patients with psychiatric disorders when required to prevent injury to themselves or to others; establishes therapeutic regimens; conducts individual or group therapy sessions; provides short-term treatment to patients psychologically or physically dependent upon alcohol or drugs; maintains custody of sensitive or medically privileged records and correspondence that evolve during treatment of patients; prepares medical records; and submits required reports.															
Substance Abuse Patient Days	0	22	0	0	0	0	22	# of Beds	0.1			22			
Substance Abuse Care provides specialized care and consultative evaluation for eligible inpatients; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of patients psychologically or physically dependent upon alcohol or drugs; maintains protective custody of patients when required to prevent injury to themselves or to others; establishes therapeutic regimens; conducts individual or group therapy sessions; maintains custody of sensitive or medically privileged records and correspondence that evolve during treatment of patients; prepares medical records; and submits required reports.															
Sub Acute / Transitional Care	333	252	84	72	158	87	986	# of Beds	3.4	986					
Inpatient Care Totals	333	1,046	84	72	158	87	1,780	# of Beds	6.4				X		
Elder Care															
Nursing Home	5	5	4	2	3	2	21	# of Beds	22.6						
Assisted Living	5	6	5	2	3	2	24	# of Beds	26.5						
Hospice	0	0	0	0	0	0	2	# of Beds	2.0						
Elder Care Totals	10	12	9	4	6	5	46		51.1	51.1				Tribal Partnership	
Ancillary Services															
Laboratory Services															

Intentionally Blank



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

Northwestern Nevada

Regional Population

14,567

	Referred Service Area Workload									Delivery Options				* All workload referred for consideration at the Area CHS level was re-assigned to a CHS Delivery Option at the PSA level.
Discipline	Reno/Sparks	Washoe	Fallon	Yerington	Pyramid Lake	Walker River	Total	Key Characteristics	Number Required	Direct	Region DC-VP	CHS*	Area Referral	
Clinical Pathology operates the clinical laboratories and conducts studies, investigations, analyses, and examinations, including diagnostic and routine tests and systems. Additional activities may include, but are not limited to, transportation of specimens from the nursing floors and surgical suites and preparation of samples for testing.														
Clinical Lab	14,359	0	0	3,421	0	4,220	22,000	Tech Staff @ Peak	2.2	Consider Region				
Microbiology	1,530	0	0	335	0	451	2,317	Tech Staff @ Peak	0.2					
Blood Bank	358	295	209	87	175	103	1,228	Tech Staff @ Peak	0.1					
Anatomical Pathology	0	0	0	0	0	0	0	Tech Staff @ Peak	0.0					
Anatomical Pathology conducts the histopathology and cytopathology laboratories; directs studies, examinations, and evaluations including diagnostic and routine procedures; provides referrals and consultations; performs post-mortem examinations; and operates the morgue.														
Lab Totals	16,247	295	209	3,844	175	4,774	25,544	Tech Staff @ Peak	2.5					
Acute Dialysis	0	10	0	0	0	0	10	Rooms	0.0	10				
Acute Dialysis provides purification of the patient's blood using the patient's own peritoneal membrane, located in the abdomen, as the filter to remove excess water and toxins, while the patient is hospitalized. Specialty trained personnel teach all patients own family members through an intense training program how to perform these same functions in the home settings.														
Diagnostic Imaging														
Diagnostic Radiology provides diagnostic radiologic services to inpatients and outpatients. Activities include, but are not limited to, processing, examining, interpreting, storing, and retrieving radiographs and fluorographs; directing a radiological safety program; and consulting with physicians and patients.														
Radiographic	0	0	0	0	0	0	0	Rooms	0.0	0				
Ultrasound	0	0	0	0	0	0	0	Rooms	0.0	0				
Mammography	514	0	292	136	245	155	1,342	Rooms	0.3	1,342	Mobile Screening Mamography			
Fluoroscopy	0	0	0	0	0	0	0	Rooms	0.0	0				
CT	0	0	0	0	0	0	0	Rooms	0.0	0				
MRI	0	0	0	0	0	0	0	Rooms	0.0	0				
Diagnostic Imaging Totals	514	0	292	136	245	155	1,342	Radiologist	0.1	1342				
Nuclear Medicine	0	0	0	0	0	0	0	Rooms	0.0	0				
Nuclear Medicine provides diagnostic nuclear medicine studies, interprets such studies, and performs therapeutic nuclear medicine treatment through the use of injectable or ingestible radioactive isotopes in conformance with licensure regulations. Functions and activities of the work center include, but are not limited to, performing clinical investigative studies, providing whole blood counting, evaluating patients suspected of being contaminated with gamma-emitting radio nuclides, consulting with patients and attending physicians, and maintaining radioactive waste disposal and storage of radioactive materials.														
Rehabilitation Services														
Rehabilitation Services develops, coordinates, and uses special knowledge and skills in planning, organizing, and managing programs for the care of inpatients and outpatients whose ability to function is impaired or threatened by disease or injury and incorporates activities such as: direct patient care, evaluation, testing, consultation, counseling, teaching, administration, research, and community services. This service typically consists of three disciplines: Physical Therapy, Occupational Therapy, and Speech Therapy.														
Rehab Total	0	0	0	0	0	0	0	Therapy FTE	0.0					
Respiratory Therapy	0	7,112	0	0	0	0	7,112	Therapy FTE	0.1	7,112				
Respiratory Therapy provides and administers oxygen, humidification, aerosol, and certain potent drugs through inhalation or positive pressure and provides other forms of rehabilitative therapy including initiating, monitoring, and evaluating patient performance and reactions to therapy and performing blood gas analysis. The service also tests and evaluates the patient's ability to exchange oxygen and other gases through measurement of inhaled and exhaled gases and analysis of blood.														
Cardiac Catheterization Cases	0	0	0	0	0	0	0	Rooms	0.0	0				
The Cardiac Catheterization provides services including the operations and maintenance of specialized equipment that displays and records the condition of the heart and circulatory system. Other activities include explaining test procedures to patients; performing invasive procedures using catheters and other techniques; retrieving and analyzing test results; and inspecting, testing, calibrating, and maintaining special equipment.														
Home Health Care	0	0	0	0	0	0	0	# FTE	0.0					
Home Health Care is provided to individuals and families in their places of residence to promote, maintain, or restore health or to maximize the level of independence while minimizing the effects of disability and illness, including terminal illness.														
Outpatient Surgery Cases														
Cardiovascular	0	3	0	0	0	0	3	Outpatient ORs	0.0	3				
Digestive	0	54	0	0	0	0	54	Outpatient ORs	0.0	54				
Endocrine	0	0	0	0	0	0	0	Outpatient ORs	0.0	0				
ENT	0	24	0	0	0	0	24	Outpatient ORs	0.0	24				
Gynecology	0	18	0	0	0	0	18	Outpatient ORs	0.0	18				
Hemic and Lymphatic	0	1	0	0	0	0	1	Outpatient ORs	0.0	1				
Integument	0	20	0	0	0	0	20	Outpatient ORs	0.0	20				
Musculoskeletal	0	33	0	0	0	0	33	Outpatient ORs	0.0	33				
Nervous	0	9	0	0	0	0	9	Outpatient ORs	0.0	9				
Ocular	0	21	0	0	0	0	21	Outpatient ORs	0.0	21				
Respiratory	0	3	0	0	0	0	3	Outpatient ORs	0.0	3				
Urogenital	0	14	0	0	0	0	14	Outpatient ORs	0.0	14				
Endoscopy	0	22	0	0	0	0	22	Endoscopy Rooms	0.0	22				
OP Surgical Case Total	0	201	0	0	0	0	201	Outpatient ORs	0.1					
Inpatient Surgery Cases	0	50	0	0	0	0	50	Inpatient ORs	0.0	50				
Surgical Case Total									0.1					
Facility Support Services														
Clinical Engineering	1.0	0.8	0.6	0.3	0.5	0.3	3.5	# of FTE		4				

Intentionally Blank



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

Northwestern Nevada

Regional Population

14,567

	Referred Service Area Workload									Delivery Options					* All workload referred for consideration at the Area CHS level was re-assigned to a CHS Delivery Option at the PSA level.	
Discipline	Reno/Sparks	Washoe	Fallon	Yerington	Pyramid Lake	Walker River	Total	Key Characteristics	Number Required	Region			Area Referral	Other Options or Remarks		
										Direct	DC-VP	CHS*				
Clinical Engineering provides preventive maintenance, inspection, and repair of medical and dental equipment; conducts a systematic inspection of equipment to determine operational status, and assigns serviceability condition codes to equipment; performs scheduled preventive maintenance of medical and dental equipment; repairs or replaces worn or broken parts; rebuilds and fabricates equipment or components; modifies equipment and installs new equipment; inspects and tests contractor-installed equipment; disassembles, packs, receives, and inspects equipment; and maintains audio and video equipment.																
Preventative Care																
Health Promotion / Disease Prevention (Preventive Care)																
Case Management	0	0	0	0	0	0	0	# of FTE								
Epidemiology	0	1	0	0	0	0	1	# of FTE	X							
Additional Services																
Hostel Services	0	0	0	0	0	0	0	# of FTE	X							

Intentionally Blank



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery

Colorado River Region

Regional Population **10,160**

	Referred Service Area Workload					Delivery Options				
Discipline	Ft. Yuma	Parker	Total	Key Characteristics	Number Required	Region			Area Referral	Other Options or Remarks
						Direct	DC-VP	CHS*		
Specialty Care										
Specialty Care examines, diagnoses, and treats diseases and injuries requiring specialized capabilities diagnosis and procedures beyond the Primary Care team. The service is typically provided by visiting providers who have established clinic hours for consistent referral patterns.										
Orthopedics	0	0	0	Providers	0.0					
Ophthalmology	0	0	0	Providers	0.0					
Dermatology	0	0	0	Providers	0.0					
General Surgery	0	0	0	Providers	0.0					
Otolaryngology	0	0	0	Providers	0.0					
Cardiology	0	0	0	Providers	0.0					
Urology	0	252	252	Providers	0.1	Contract at PSA Level				
Neurology	0	0	0	Providers	0.0	Contract at PSA Level				
Other Subspecialties	0	0	0	Providers	0.0					
Nephrology	0	0	0	Providers	0.0					
Allergy	0	0	0	Providers	0.0					
Pulmonology	0	0	0	Providers	0.0					
Gerontology	0	0	0	Providers	0.0					
Gastroenterology	0	0	0	Providers	0.0					
Rheumatology	0	0	0	Providers	0.0					
Oncology	0	0	0	Providers	0.0					
Pediatric-Genetics	0	0	0	Providers	0.0					
Traditional Healing	0	0	0	Providers	0.0					
Specialty Care Sub-	0	252	252	Exam Rooms	0.1					
Inpatient Care										
Labor & Delivery	0	0	0	LDRs	0.0					
Obstetrics Patient Days	0	0	0	# of Beds	0.0					
Obstetrics provides for specialized care, treatment, and consultative evaluation to eligible inpatients; provides antepartum, delivery, and postpartum care to maternity patients; and has responsibility for the operation and maintenance of the labor and delivery suite. The labor and delivery suite provides labor and delivery care by specially trained personnel to eligible patients, including prenatal care during labor, assistance during delivery, post-natal care, and minor gynecological surgery, if it is performed in the suite. Additional activities may include preparing sterile set-ups for deliveries; preparing patients for transportation to the delivery suite and the post-anesthesia.										
Neonatology Patient Days	0	0	0	# of Bassinets	0.0					
The Newborn Nursery provides specialized inpatient care, treatment, and consultative evaluation of newborn infants; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of the newborn, including those born prematurely; and provides for, or otherwise ensures, appropriate diagnostic evaluation and care of all inpatient in the neonatal age group; prepares medical records; and submits required reports.										
Pediatric Patient Days	0	0	0	# of Beds	0.0					
Pediatric Care provides specialized inpatient care, treatment, and consultative evaluation of infants, children, and adolescents; maintains close liaison with the other professional services; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of eligible patients; prepares medical records; and submits required reports.										
Adult Medical Acute Care										
Medical Care provides inpatient care and consultative evaluation in the medical specialties and subspecialties described in this section; coordinates healthcare delivery relative to the examination, diagnosis, treatment and proper disposition of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the medical care function will vary according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies.										
Cardiology	68	9	76	# of Beds	0.3	63			13	
Endocrinology	161	3	164	# of Beds	0.7	158			6	



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery

Colorado River Region

Regional Population **10,160**

Discipline	Referred Service Area Workload					Delivery Options			
	Ft. Yuma	Parker	Total	Key Characteristics	Number Required	Region		Area Referral	Other Options or Remarks
						Direct	DC-VP	CHS*	
Gastroenterology	109	24	133	# of Beds	0.6	101		33	
General Medicine	61	0	61	# of Beds	0.3	61			
Hematology	5	0	5	# of Beds	0.0	5			
Nephrology	58	0	58	# of Beds	0.3	58			
Neurology	32	0	32	# of Beds	0.1	32			
Oncology	8	0	8	# of Beds	0.0	8			
Pulmonary	98	0	98	# of Beds	0.4	98			
Rheumatology	17	0	17	# of Beds	0.1	17			
Unknown	21	0	21	# of Beds	0.1	21			
Medical Patient Day Total			674		2.9	622	0	0	52
Adult Surgical Acute Care									
<i>Surgical Care provides inpatient care and consultative evaluation in the surgical specialties and subspecialties described in this subsection; coordinates healthcare delivery relative to the examination, treatment, diagnosis, and proper disposition of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the surgical care function varies according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies.</i>									
Dentistry	0	0	0	# of Beds	0.0			0	
Dermatology	0	0	0	# of Beds	0.0			0	
General Surgery	0	0	0	# of Beds	0.0			0	
Gynecology	0	0	0	# of Beds	0.0			0	
Neurosurgery	0	0	0	# of Beds	0.0				Contract at PSA Level
Ophthalmology	0	0	0	# of Beds	0.0			0	
Orthopedics	0	0	0	# of Beds	0.0			0	
Otolaryngology	0	0	0	# of Beds	0.0			0	
Thoracic Surgery	0	0	0	# of Beds	0.0				Contract at PSA Level
Urology	0	0	0	# of Beds	0.0			0	
Vascular Surgery	0	0	0	# of Beds	0.0				Contract at PSA Level
Surgical Patient Day Total			0		0.0				
Intensive Care Unit	252	0	252	# of Beds	1.0			252	
<i>Intensive Care Units (ICUs) provide treatment for patients who require intensified, comprehensive observation and care because of shock, trauma, or other life-threatening conditions. They are staffed with specially trained personnel and contain monitoring equipment and other specialized support equipment for treating.</i>									
Psychiatry Patient	22	28	50	# of Beds	0.2			50	
<i>Psychiatric Care provides specialized care and consultative evaluation for eligible inpatients; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of patients with psychotic, neurotic, or other mental disorders; maintains protective custody of patients with psychiatric disorders when required to prevent injury to themselves or to others; establishes therapeutic regimens; conducts individual or group therapy sessions; provides short-term treatment to patients psychologically or physically dependent upon alcohol or drugs; maintains custody of sensitive or medically privileged records and correspondence that evolve during treatment of patients; prepares medical records; and submits required reports.</i>									
Substance Abuse	10	120	130	# of Beds	0.4			130	
<i>Substance Abuse Care provides specialized care and consultative evaluation for eligible inpatients; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of patients psychologically or physically dependent upon alcohol or drugs; maintains protective custody of patients when required to prevent injury to themselves or to others; establishes therapeutic regimens; conducts individual or group therapy sessions; maintains custody of sensitive or medically privileged records and correspondence that evolve during treatment of patients; prepares medical records; and submits required reports.</i>									
Sub Acute / Transitional Care	337	0	337	# of Beds	1.2	337			
Inpatient Care Totals	621	148	1,444	# of Beds	5.7	959	0	0	485
Ancillary Services									
Acute Dialysis	0	0	0	Rooms	0.0				



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery

Colorado River Region

Regional Population **10,160**

Regional Population						20,160					
Discipline	Referred Service Area Workload					Delivery Options					
	Ft. Yuma	Parker	Total	Key Characteristics	Number Required	Region			Area Referral	* All workload referred for consideration at the Area CHS level was re-assigned to a CHS Delivery Option at the PSA level.	
						Direct	DC-VP	CHS*			
Other Options or Remarks											
Acute Dialysis provides purification of the patient's blood using the patient's own peritoneal membrane, located in the abdomen, as the filter to remove excess water and toxins, while the patient is hospitalized. Specialty trained personnel teach all patients own family members through an intense training program how to perform these same functions in the home settings.											
Nuclear Medicine	0	0	0	Rooms	0.0	0					
Nuclear Medicine provides diagnostic nuclear medicine studies, interprets such studies, and performs therapeutic nuclear medicine treatment through the use of injectable or ingestible radioactive isotopes in conformance with licensure regulations. Functions and activities of the work center include, but are not limited to, performing clinical investigative studies, providing whole blood counting, evaluating patients suspected of being contaminated with gamma-emitting radio nuclides, consulting with patients and attending physicians, and maintaining radioactive waste disposal and storage of radioactive materials.											
Rad. Oncology	0	0	0	Rooms	0.0	0					
Chemotherapy	0	0	0	Rooms	0.0	X					
Rehabilitation Services											
Rehabilitation Services develops, coordinates, and uses special knowledge and skills in planning, organizing, and managing programs for the care of inpatients and outpatients whose ability to function is impaired or threatened by disease or injury and incorporates activities such as: direct patient care, evaluation, testing, consultation, counseling, teaching, administration, research, and community services. This service typically consists of three disciplines: Physical Therapy, Occupational Therapy, and Speech Therapy.											
Rehab Total	0	0	0	Therapy FTE	0.0						
Respiratory Therapy	0	19,441	19,441	Therapy FTE	0.3	19,441					
Respiratory Therapy provides and administers oxygen, humidification, aerosol, and certain potent drugs through inhalation or positive pressure and provides other forms of rehabilitative therapy including initiating, monitoring, and evaluating patient performance and reactions to therapy and performing blood gas analysis. The service also tests and evaluates the patient's ability to exchange oxygen and other gases through measurement of inhaled and exhaled gases and analysis of blood.											
Cardiac Catharization	0	0	0	Rooms	0.0	0					
The Cardiac Catheterization provides services including the operations and maintenance of specialized equipment that displays and records the condition of the heart and circulatory system. Other activities include explaining test procedures to patients; performing invasive procedures using catheters and other techniques; retrieving and analyzing test results; and inspecting, testing, calibrating, and maintaining special equipment.											
Outpatient Surgery Cases											
Cardiovascular	0	0	0	Outpatient ORs	0.0	Contract at PSA Level					
Digestive	66	0	66	Outpatient ORs	0.1	66					
Endocrine	0	0	0	Outpatient ORs	0.0	0					
ENT	34	0	34	Outpatient ORs	0.0	34					
Gynecology	23	0	23	Outpatient ORs	0.0	23					
Hemic and Lymphatic	1	0	1	Outpatient ORs	0.0	1					
Integument	26	0	26	Outpatient ORs	0.0	26					
Musculoskeletal	42	0	42	Outpatient ORs	0.0	42					
Nervous	0	0	0	Outpatient ORs	0.0	Contract at PSA Level					
Ocular	23	0	23	Outpatient ORs	0.0	23					
Respiratory	4	0	4	Outpatient ORs	0.0	4					
Urogenital	17	0	17	Outpatient ORs	0.0	17					
Endoscopy	25	0	25	Endoscopy Rms	0.0	25					
OP Surgical Case	236	0	236	Outpatient ORs	0.1	0	0	0	236		
Inpatient Surgery	6	0	6	Inpatient ORs	0.0	6					
Surgical Case Total	243	0	243		0.1	0	0	0	243		
Additional Services											
Hostel Services	0	0	0	# of FTE		X	Provide Medical Patient Family Members from Yuma				

Intentionally Blank



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option

Phoenix
Regional Population 92,131

	Referred Service Area Workload								Delivery Options					* All workload referred for consideration at the Area CHS level was re-assigned to a CHS Delivery Option at the PSA level.
Discipline	Phoenix	Hu-Hu-Kam	Salt River	Middle Verde	Ft. McDowell	Total	Key Characteristics	Number Required	Direct	Region DC-VP	CHS*	Area Referral	Other Options or Remarks	
Emergency Care														
The Emergency Medical Clinic provides emergency care, diagnostic services, treatment, surgical procedures, and proper medical disposition of an emergency nature to patients who present themselves to the service. It refers patients to specialty clinics and admits patients as needed; provides clinical consultation services and professional training of assigned personnel; supports mass casualty and fire drills; and prepares reports.									It refers patients to specialty clinics and admits patients as needed; provides clinical consultation services and professional training of assigned personnel; supports mass					
Emergency	0	0	2,030	0	414	2,444	Patient Spaces	1.3	Accommodated with Migration %					
Specialty Care														
Specialty Care examines, diagnoses, and treats diseases and injuries requiring specialized capabilities diagnosis and procedures beyond the Primary Care team. The service is typically provided by visiting providers who have established clinic hours for consistent referral patterns.														
Orthopedics	0	0	1,113	385	173	1,671	Providers	0.6	1,671					
Ophthalmology	0	0	0	275	99	374	Providers	0.1	374					
Dermatology	0	0	0	303	134	437	Providers	0.1	437					
General Surgery	0	0	846	295	130	1,271	Providers	0.5	1,271					
Otolaryngology	0	0	0	176	84	260	Providers	0.1	260					
Cardiology	1,186	0	177	86	26	1,475	Providers	0.7	1,475					
Urology	2,009	0	250	100	37	2,397	Providers	0.9	2,397					
Neurology	2,140	0	233	81	36	2,490	Providers	1.3	2,490					
Other Subspecialties	0.0	0.0	0.0	0.0	0.0	0.0	Providers	0.0						
Nephrology	0.0	0.0	0.0	0.0	0.0	0.0	Providers	0.0	0.0					
Allergy	0.0	0.0	0.1	0.0	0.0	0.2	Providers	0.0	0.2					
Pulmonology	0.0	0.1	0.0	0.0	0.0	0.2	Providers	0.0	0.2					
Gerontology	0.0	0.0	0.0	0.0	0.0	0.0	Providers	0.0	0.0					
Gastroenterology	0.0	0.2	0.1	0.0	0.0	0.4	Providers	0.0	0.4					
Rheumatology	0.0	0.0	0.0	0.0	0.0	0.0	Providers	0.0	0.0					
Oncology	0.0	0.0	0.1	0.0	0.0	0.1	Providers	0.0	0.1					
Pediatric-Genetics	0.0	0.0	0.0	0.0	0.0	0.0	Providers	0.0						
Traditional Healing	0.0	0.0	0.0	0.0	0.0	0.0	Providers	0.0						
Specialty Care Sub-Total	5,334	0	2,619	1,701	720	10,375	Exam Rooms	4.3						
Other Ambulatory Care Services														
Audiology Visits	0	0	417	223	102	742	Audiologists	0.4	742					
The Audiology Clinic provides comprehensive audiologic support for patients for the determination of etiology, pathology, and magnitude of hearing loss and potential for remediation and rehabilitation; assists in the evaluation of auditory and vestibular systems. Specific services include pure tone threshold audiometry; basic and advanced clinical testing; pediatric evaluations; neonatal hearing testing as part of the early hearing loss identification program; hearing aid evaluation, fittings, and repairs; ear mold fittings; vestibular evaluations, dispensing of hearing protection devices (fitting, education, and motivation); determination of proper referral and disposition.														
Inpatient Care														
Labor & Delivery Births	0	234	126	0	17	378	LDRs	2.0	378					
Obstetrics Patient Days	0	638	344	0	47	1,029	# of Beds	5.6	1,029					
Obstetrics provides for specialized care, treatment, and consultative evaluation to eligible inpatients; provides antepartum, delivery, and postpartum care to maternity patients; and has responsibility for the operation and maintenance of the labor and delivery suite. The labor and delivery suite provides labor and delivery care by specially trained personnel to eligible patients, including prenatal care during labor, assistance during delivery, post-natal care, and minor gynecological surgery, if it is performed in the suite. Additional activities may include preparing sterile set-ups for deliveries; preparing patients for transportation to the delivery suite and the post-anesthesia.														
Neonatology Patient Days	0	476	296	0	42	814	# of Bassinets	4.7	814					
The Newborn Nursery provides specialized inpatient care, treatment, and consultative evaluation of newborn infants; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of the newborn, including those born prematurely; and provides for, or otherwise ensures, appropriate diagnostic evaluation and care of all inpatient in the neonatal age group; prepares medical records; and submits required reports.														
Pediatric Patient Days	0	488	219	16	21	744	# of Beds	4.4	744					
Pediatric Care provides specialized inpatient care, treatment, and consultative evaluation of infants, children, and adolescents; maintains close liaison with the other professional services; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of eligible patients; prepares medical records; and submits required reports.														
Adult Medical Acute Care														

Intentionally Blank



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option

Phoenix
Regional Population 92,131

	Referred Service Area Workload								Delivery Options					* All workload referred for consideration at the Area CHS level was re-assigned to a CHS Delivery Option at the PSA level.
Discipline	Phoenix	Hu-Hu-Kam	Salt River	Middle Verde	Ft. McDowell	Total	Key Characteristics	Number Required	Direct	Region DC-VP	CHS*	Area Referral	Other Options or Remarks	
Medical Care provides inpatient care and consultative evaluation in the medical specialties and subspecialties described in this section; coordinates healthcare delivery relative to the examination, diagnosis, treatment and proper disposition of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the medical care function will vary according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies.														
Cardiology	0	25	90	30	13	157	# of Beds	0.7					157	
Endocrinology	0	9	205	8	4	226	# of Beds	1.0					226	
Gastroenterology	0	50	120	29	20	219	# of Beds	1.0					219	
General Medicine	0	0	196	27	13	236	# of Beds	1.0					236	
Hematology	0	0	11	2	4	17	# of Beds	0.1					17	
Nephrology	0	0	111	6	3	120	# of Beds	0.5					120	
Neurology	0	0	58	14	7	79	# of Beds	0.3					79	
Oncology	0	0	11	6	2	19	# of Beds	0.1					19	
Pulmonary	0	0	151	32	15	198	# of Beds	0.9					198	
Rheumatology	0	0	7	1	1	9	# of Beds	0.0					9	
Unknown	0	0	10	3	2	14	# of Beds	0.1					14	
Medical Patient Day Total	0	84	970	158	82	1,294		5.7	1,294	0	0	0		
Adult Surgical Acute Care														
Surgical Care provides inpatient care and consultative evaluation in the surgical specialties and subspecialties described in this subsection; coordinates healthcare delivery relative to the examination, treatment, diagnosis, and proper disposition of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the surgical care function varies according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies.														
Dentistry	0	6	1	0	3	11	# of Beds	0.0					11	
Dermatology	0	156	5	1	1	163	# of Beds	0.7					163	
General Surgery	0	654	264	34	19	970	# of Beds	4.1					970	
Gynecology	0	153	62	10	6	232	# of Beds	1.0					232	
Neurosurgery	0	0	0	0	0	0	# of Beds	0.0			0			
Ophthalmology	0	9	1	0	0	11	# of Beds	0.0					11	
Orthopedics	0	366	128	27	13	534	# of Beds	2.3					534	
Otolaryngology	0	21	5	1	1	29	# of Beds	0.1					29	
Thoracic Surgery	0	0	0	0	0	0	# of Beds	0.0			0			
Urology	80	45	14	3	2	145	# of Beds	0.0					145	
Vascular Surgery	0	0	0	0	0	0	# of Beds	1.1				0		
Surgical Patient Day Total	80	1,411	480	77	45	2,094		8.9	2,094	0	0			
Intensive Care Unit	0	983	315	47	30	1,375	# of Beds	5.4	1,375					
Intensive Care Units (ICUs) provide treatment for patients who require intensified, comprehensive observation and care because of shock, trauma, or other life-threatening conditions. They are staffed with specially trained personnel and contain monitoring equipment and other specialized support equipment for treating .														
Psychiatry Patient Days	293	118	31	12	5	459	# of Beds	1.6					459	
Psychiatric Care provides specialized care and consultative evaluation for eligible inpatients; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of patients with psychotic, neurotic, or other mental disorders; maintains protective custody of patients with psychiatric disorders when required to prevent injury to themselves or to others; establishes therapeutic regimens; conducts individual or group therapy sessions; provides short-term treatment to patients psychologically or physically dependent upon alcohol or drugs; maintains custody of sensitive or medically privileged records and correspondence that evolve during treatment of patients; prepares medical records; and submits required reports.														
Substance Abuse Patient Days	174	52	14	5	2	247	# of Beds	0.8					247	
Substance Abuse Care provides specialized care and consultative evaluation for eligible inpatients; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of patients psychologically or physically dependent upon alcohol or drugs; maintains protective custody of patients when required to prevent injury to themselves or to others; establishes therapeutic regimens; conducts individual or group therapy sessions; maintains custody of sensitive or medically privileged records and correspondence that evolve during treatment of patients; prepares medical records; and submits required reports.														
Sub Acute / Transitional Care	0	0	520	160	48	728	# of Beds	2.5	728					
Inpatient Care Totals	547	4,251	3,191	475	322	8,785	# of Beds	39.6	8,080	0	0	706		
Ancillary Services														
Laboratory Services														
Clinical Pathology operates the clinical laboratories and conducts studies, investigations, analyses, and examinations, including diagnostic and routine tests and systems. Additional activities may include, but are not limited to, transportation of specimens from the nursing floors and surgical suites and preparation of samples for testing.														
Clinical Lab	0	0	0	7,607	3,990	11,598	Tech Staff @ Peak	1.2	11,598					
Microbiology	0	0	0	913	425	1,337	Tech Staff @ Peak	0.1	1,337					
Blood Bank	0	0	546	0	82	628	Tech Staff @ Peak	0.1	628					
Anatomical Pathology	0	0	0	0	0	0	Tech Staff @ Peak	0.0	0					
Anatomical Pathology conducts the histopathology and cytopathology laboratories; directs studies, examinations, and evaluations including diagnostic and routine procedures; provides referrals and consultations; performs post-mortem examinations; and operates the morgue.														
Lab Totals	0	0	546	8,520	4,497	13,563	Tech Staff @ Peak	1.4						

Intentionally Blank



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option

Phoenix
Regional Population 92,131

	Referred Service Area Workload								Delivery Options					* All workload referred for consideration at the Area CHS level was re-assigned to a CHS Delivery Option at the PSA level.
Discipline	Phoenix	Hu-Hu-Kam	Salt River	Middle Verde	Ft. McDowell	Total	Key Characteristics	Number Required	Direct	Region DC-VP	CHS*	Area Referral	Other Options or Remarks	
Acute Dialysis	110	59	15	6	2	192	Rooms	0.3	192					
Acute Dialysis provides purification of the patient's blood using the patient's own peritoneal membrane, located in the abdomen, as the filter to remove excess water and toxins, while the patient is hospitalized. Specialty trained personnel teach all patients own family members through an intense training program how to perform these same functions in the home settings.														
Diagnostic Imaging														
Diagnostic Radiology provides diagnostic radiologic services to inpatients and outpatients. Activities include, but are not limited to, processing, examining, interpreting, storing, and retrieving radiographs and fluorographs; directing a radiological safety program; and consulting with physicians and patients.														
Radiographic	0	0	1,979	253	343	2,575	Rooms	0.4	2,575					
Ultrasound	0	0	389	139	60	588	Rooms	0.2	588					
Mammography	0	2,498	698	293	94	3,583	Rooms	0.9	3,583					
Fluoroscopy	0	0	151	51	29	231	Rooms	0.1	231					
CT	0	546	144	55	29	774	Rooms	0.2	774					
MRI	0	381	102	37	16	535	Rooms	0.1	535					
Diagnostic Imaging Totals	0	3,425	3,463	828	571	8,286	Radiologist	0.7						
Nuclear Medicine	1,458	593	166	51	25	2,294	Rooms	1.1	2,294					
Nuclear Medicine provides diagnostic nuclear medicine studies, interprets such studies, and performs therapeutic nuclear medicine treatment through the use of injectable or ingestible radioactive isotopes in conformance with licensure regulations. Functions and activities of the work center include, but are not limited to, performing clinical investigative studies, providing whole blood counting, evaluating patients suspected of being contaminated with gamma-emitting radio nuclides, consulting with patients and attending physicians, and maintaining radioactive waste disposal and storage of radioactive materials.														
Rad. Oncology	0	0	0	0	0	0	Rooms	0.0			0			
Chemotherapy	210	41	51	11	0	313	Rooms	0.2	313					
Rehabilitation Services														
Rehabilitation Services develops, coordinates, and uses special knowledge and skills in planning, organizing, and managing programs for the care of inpatients and outpatients whose ability to function is impaired or threatened by disease or injury and incorporates activities such as: direct patient care, evaluation, testing, consultation, counseling, teaching, administration, research, and community services. This service typically consists of three disciplines: Physical Therapy, Occupational Therapy, and Speech Therapy.														
Physical Therapy	0	0	0	0	12	12	Therapy FTE	0.0						
Occupational Therapy	0	0	0	0	0	0	Therapy FTE	0.0						
Speech Therapy	0	0	0	0	0	0	Therapy FTE	0.0						
Rehab Total	0	0	0	906	0	906	Therapy FTE	0.5	906					
Respiratory Therapy	0	0	15,771	8,417	2,971	27,159	Therapy FTE	0.4						
Respiratory Therapy provides and administers oxygen, humidification, aerosol, and certain potent drugs through inhalation or positive pressure and provides other forms of rehabilitative therapy including initiating, monitoring, and evaluating patient performance and reactions to therapy and performing blood gas analysis. The service also tests and evaluates the patient's ability to exchange oxygen and other gases through measurement of inhaled and exhaled gases and analysis of blood.														
Cardiac Catherization Cases	0	0	0	0	0	0	Rooms	0.0			0			
The Cardiac Catheterization provides services including the operations and maintenance of specialized equipment that displays and records the condition of the heart and circulatory system. Other activities include explaining test procedures to patients; performing invasive procedures using catheters and other techniques; retrieving and analyzing test results; and inspecting, testing, calibrating, and maintaining special equipment.														
Outpatient Surgery Cases														
Cardiovascular	0	0	0	0	0	0	Outpatient ORs	0.0			0			
Digestive	0	340	88	35	13	477	Outpatient ORs	0.4	477					
Endocrine	0	2	1	0	0	3	Outpatient ORs	0.0	3					
ENT	0	186	54	14	8	262	Outpatient ORs	0.1	262					
Gynecology	0	126	34	12	5	177	Outpatient ORs	0.1	177					
Hemic and Lymphatic	0	7	2	1	0	10	Outpatient ORs	0.0	10					
Integument	0	133	35	13	5	187	Outpatient ORs	0.1	187					
Musculoskeletal	0	221	59	21	9	310	Outpatient ORs	0.2	310					
Nervous	0	0	0	0	0	0	Outpatient ORs	0.0			0			
Ocular	0	0	42	14	4	60	Outpatient ORs	0.0	60					
Respiratory	0	0	5	2	1	7	Outpatient ORs	0.0	7					
Urogenital	0	89	24	9	4	125	Outpatient ORs	0.1	125					
Endoscopy	0	0	32	14	5	51	Endoscopy Rms	0.0	51					
OP Surgical Case Total	0	1,104	344	121	50	1,619	Outpatient ORs	1.0	1,619	0	0	0		
Inpatient Surgery Cases	0	313	104	32	15	465	Inpatient ORs	0.5	465					
Surgical Case Total	0	1,417	448	154	65	2,084		1.5	2,084	0	0	0		
Facility Support Services														
Durable Medical Equipment	0	0	0	0	0	0	# of FTE							
Clinical Engineering	0.0	0.0	1.6	0.5	0.3	2.4	# of FTE		2					
Clinical Engineering provides preventive maintenance, inspection, and repair of medical and dental equipment; conducts a systematic inspection of equipment to determine operational status, and assigns serviceability condition codes to equipment; performs scheduled preventive maintenance of medical and dental equipment; repairs or replaces worn or broken parts; rebuilds and fabricates equipment or components; modifies equipment and installs new equipment; inspects and tests contractor-installed equipment; disassembles, packs, receives, and inspects equipment; and maintains audio and video equipment.														

Intentionally Blank

Delivery Plan

Northern Arizona

Establishes Projected workload and key characteristics per product line, while recommending a delivery

Regional Population **14,479**

	Referred Service Area Workload					Delivery Options				
Discipline	Keams Canyon	Peach Springs	Total	Key Characteristics	Number Required	Region			Area Referral	* All workload referred for consideration at the Area CHS level was re-assigned to a CHS Delivery Option at the PSA level.
						Direct	DC-VP	CHS*		
Other Options or Remarks										
Specialty Care										
Specialty Care examines, diagnoses, and treats diseases and injuries requiring specialized capabilities diagnosis and procedures beyond the Primary Care team. The service is typically provided by visiting providers who have established clinic hours for consistent referral patterns.										
Orthopedics	2,046	0	2,046	Providers	0.8	2,046				
Ophthalmology	1,649	350	1,998	Providers	0.6	1,998				
Dermatology	1,623	425	2,048	Providers	0.5				Telemedicine at Local Level	
General Surgery	1,603	0	1,603	Providers	0.6	1,603				
Otolaryngology	957	265	1,222	Providers	0.5		1,222			
Cardiology	540	98	638	Providers	0.3		638			
Urology	589	129	718	Providers	0.3		718			
Neurology	436	114	551	Providers	0.3		551			
Other Subspecialties	0	0	0	Providers	0.0					
Nephrology	0	0	0	Providers	0.0					
Allergy	0	0	0	Providers	0.0					
Pulmonology	0	0	0	Providers	0.0					
Gerontology	0	0	0	Providers	0.0					
Gastroenterology	0	0	0	Providers	0.0					
Rheumatology	0	0	0	Providers	0.0					
Oncology	0	0	0	Providers	0.0					
Pediatric-Genetics	0	0	0	Providers	0.0					
Traditional Healing	0	0	0	Providers	0.0					
Specialty Care Sub-	9,443	1,381	10,824	Exam Rooms	4.5					
Inpatient Care										
Labor & Delivery	0	0	0	LDRs	0.0					
Obstetrics Patient Days	0	0	0	# of Beds	0.0					
Obstetrics provides for specialized care, treatment, and consultative evaluation to eligible inpatients; provides antepartum, delivery, and postpartum care to maternity patients; and has responsibility for the operation and maintenance of the labor and delivery suite. The labor and delivery suite provides labor and delivery care by specially trained personnel to eligible patients, including prenatal care during labor, assistance during delivery, post-natal care, and minor gynecological surgery, if it is performed in the suite. Additional activities may include preparing sterile set-ups for deliveries; preparing patients for transportation to the delivery suite and the post-anesthesia.										
Neonatology Patient Days	0	0	0	# of Bassinets	0.0					
The Newborn Nursery provides specialized inpatient care, treatment, and consultative evaluation of newborn infants; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of the newborn, including those born prematurely; and provides for, or otherwise ensures, appropriate diagnostic evaluation and care of all inpatient in the neonatal age group; prepares medical records; and submits required reports.										
Pediatric Patient Days	319	65	384	# of Beds	2.7					
Pediatric Care provides specialized inpatient care, treatment, and consultative evaluation of infants, children, and adolescents; maintains close liaison with the other professional services; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of eligible patients; prepares medical records; and submits required reports.										
Adult Medical Acute Care										
Medical Care provides inpatient care and consultative evaluation in the medical specialties and subspecialties described in this section; coordinates healthcare delivery relative to the examination, diagnosis, treatment and proper disposition of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the medical care function will vary according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies.										
Cardiology	276	32	308	# of Beds	1.4	308		0		
Endocrinology	66	31	97	# of Beds	0.4	97		0		
Gastroenterology	206	41	247	# of Beds	1.1	247		0		



Delivery Plan

Northern Arizona

Establishes Projected workload and key characteristics per product line, while recommending a delivery

Regional Population **14,479**

	Referred Service Area Workload					Delivery Options				
Discipline	Keams Canyon	Peach Springs	Total	Key Characteristics	Number Required	Region			Area Referral	* All workload referred for consideration at the Area CHS level was re-assigned to a CHS Delivery Option at the PSA level.
						Direct	DC-VP	CHS*		
										Other Options or Remarks
General Medicine	255	34	289	# of Beds	1.3	289				
Hematology	18	5	22	# of Beds	0.1	22				
Nephrology	84	20	104	# of Beds	0.5	104				
Neurology	142	18	160	# of Beds	0.7	160				
Oncology	31	4	35	# of Beds	0.2	35				
Pulmonary	318	40	358	# of Beds	1.6	358				
Rheumatology	13	2	15	# of Beds	0.1	15				
Unknown	19	3	23	# of Beds	0.1	23				
Medical Patient Day Total	1,427	231	1,658		7.5	1,658	0	0	0	
Adult Surgical Acute Care										
Surgical Care provides inpatient care and consultative evaluation in the surgical specialties and subspecialties described in this subsection; coordinates healthcare delivery relative to the examination, treatment, diagnosis, and proper disposition of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the surgical care function varies according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies.										
Dentistry	2	0	2	# of Beds	0.0	2		0		
Dermatology	9	11	21	# of Beds	0.1	21				
General Surgery	307	64	372	# of Beds	2.1	372		0		
Gynecology	83	29	112	# of Beds	0.6	112				
Neurosurgery	0	0	0	# of Beds	0.0			0		
Ophthalmology	2	6	8	# of Beds	0.0	8				
Orthopedics	242	46	288	# of Beds	1.7	288		0		
Otolaryngology	14	3	17	# of Beds	0.1	17				
Thoracic Surgery	0	0	0	# of Beds	0.0			0		
Urology	0	0	0	# of Beds	0.0			0		
Vascular Surgery	0	0	0	# of Beds	0.0			0		
Surgical Patient Day Total	659	160	819		4.7	819		0	0	
Intensive Care Unit	463	109	572	# of Beds	2.2					
Intensive Care Units (ICUs) provide treatment for patients who require intensified, comprehensive observation and care because of shock, trauma, or other life-threatening conditions. They are staffed with specially trained personnel and contain monitoring equipment and other specialized support equipment for treating .										
Psychiatry Patient	63	16	79	# of Beds	0.3				79	
Psychiatric Care provides specialized care and consultative evaluation for eligible inpatients; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of patients with psychotic, neurotic, or other mental disorders; maintains protective custody of patients with psychiatric disorders when required to prevent injury to themselves or to others; establishes therapeutic regimens; conducts individual or group therapy sessions; provides short-term treatment to patients psychologically or physically dependent upon alcohol or drugs; maintains custody of sensitive or medically privileged records and correspondence that evolve during treatment of patients; prepares medical records; and submits required reports.										
Substance Abuse	34	7	41	# of Beds	0.1				41	
Substance Abuse Care provides specialized care and consultative evaluation for eligible inpatients; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of patients psychologically or physically dependent upon alcohol or drugs; maintains protective custody of patients when required to prevent injury to themselves or to others; establishes therapeutic regimens; conducts individual or group therapy sessions; maintains custody of sensitive or medically privileged records and correspondence that evolve during treatment of patients; prepares medical records; and submits required reports.										
Sub Acute / Transitional Care	0	241	241	# of Beds	0.8	241				
Inpatient Care Totals	2,966	828	3,794	# of Beds	18.4	2,717	0	0	120	
Acute Dialysis	0	0	0	Rooms	0.0			0		
Acute Dialysis provides purification of the patient's blood using the patient's own peritoneal membrane, located in the abdomen, as the filter to remove excess water and toxins, while the patient is hospitalized. Specialty trained personnel teach all patients own family members through an intense training program how to perform these same functions in the home settings.										
Diagnostic Imaging										

Delivery Plan

Northern Arizona

Establishes Projected workload and key characteristics per product line, while recommending a delivery

Regional Population **14,479**

		Referred Service Area Workload				Delivery Options				
Discipline	Keams Canyon	Peach Springs	Total	Key Characteristics	Number Required	Region			Area Referral	* All workload referred for consideration at the Area CHS level was re-assigned to a CHS Delivery Option at the PSA level.
						Direct	DC-VP	CHS*		
Other Options or Remarks										
Diagnostic Radiology provides diagnostic radiologic services to inpatients and outpatients. Activities include, but are not limited to, processing, examining, interpreting, storing, and retrieving radiographs and fluorographs; directing a radiological safety program; and consulting with physicians and patients.										
Radiographic	0	0	0	Rooms	0.0	0				
Ultrasound	0	0	0	Rooms	0.0	0				
Mammography	0	0	0	Rooms	0.0	0				
Fluoroscopy	0	0	0	Rooms	0.0	0				
CT	0	0	0	Rooms	0.0	0				
MRI	0	0	0	Rooms	0.0	0				
Diagnostic Imaging Totals	0	0	0	Radiologist	0.0					
Nuclear Medicine	0	0	0	Rooms	0.0	0				
Nuclear Medicine provides diagnostic nuclear medicine studies, interprets such studies, and performs therapeutic nuclear medicine treatment through the use of injectable or ingestible radioactive isotopes in conformance with licensure regulations. Functions and activities of the work center include, but are not limited to, performing clinical investigative studies, providing whole blood counting, evaluating patients suspected of being contaminated with gamma-emitting radio nuclides, consulting with patients and attending physicians, and maintaining radioactive waste disposal and storage of radioactive materials.										
Rad. Oncology	0	0	0	Rooms	0.0	0				
Chemotherapy	0	0	0	Rooms	0.0	0				
Rehabilitation Services										
Rehabilitation Services develops, coordinates, and uses special knowledge and skills in planning, organizing, and managing programs for the care of inpatients and outpatients whose ability to function is impaired or threatened by disease or injury and incorporates activities such as: direct patient care, evaluation, testing, consultation, counseling, teaching, administration, research, and community services. This service typically consists of three disciplines: Physical Therapy, Occupational Therapy, and Speech Therapy.										
Physical Therapy	0	0	0	Therapy FTE	0.0					
Occupational Therapy	0	0	0	Therapy FTE	0.0					
Speech Therapy	0	0	0	Therapy FTE	0.0					
Rehab Total	0	0	0	Therapy FTE	0.0					
Respiratory Therapy	58,921	8,039	66,960	Therapy FTE	0.9	66,960				
Respiratory Therapy provides and administers oxygen, humidification, aerosol, and certain potent drugs through inhalation or positive pressure and provides other forms of rehabilitative therapy including initiating, monitoring, and evaluating patient performance and reactions to therapy and performing blood gas analysis. The service also tests and evaluates the patient's ability to exchange oxygen and other gases through measurement of inhaled and exhaled gases and analysis of blood.										
Cardiac Catherization	0	0	0	Rooms	0.0	0				
The Cardiac Catheterization provides services including the operations and maintenance of specialized equipment that displays and records the condition of the heart and circulatory system. Other activities include explaining test procedures to patients; performing invasive procedures using catheters and other techniques; retrieving and analyzing test results; and inspecting, testing, calibrating, and maintaining special equipment.										
Home Health Care	0	0	0	# FTE	0.0					
Home Health Care is provided to individuals and families in their places of residence to promote, maintain, or restore health or to maximize the level of independence while minimizing the effects of disability and illness, including terminal illness.										
Outpatient Surgery Cases										
Cardiovascular	0	0	0	Outpatient ORs	0.0	0				
Digestive	202	45	247	Outpatient ORs	0.2	247				
Endocrine	1	0	1	Outpatient ORs	0.0	1				
ENT	79	25	103	Outpatient ORs	0.0	103				
Gynecology	60	17	77	Outpatient ORs	0.0	77				
Hemic and Lymphatic	4	1	5	Outpatient ORs	0.0	5				
Integument	72	18	90	Outpatient ORs	0.0	90				
Musculoskeletal	115	29	144	Outpatient ORs	0.1	144				
Nervous	0	0	0	Outpatient ORs	0.0	0				
Ocular	92	16	107	Outpatient ORs	0.1	107				
Respiratory	11	2	13	Outpatient ORs	0.0	13				
Urogenital	51	12	63	Outpatient ORs	0.0	63				
Endoscopy	86	17	103	Endoscopy Rms	0.0	103				
OP Surgical Case	686	165	851	Outpatient ORs	0.5					



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery

Northern Arizona

Regional Population **14,479**

Referred Service Area Workload						Delivery Options			
Discipline	Keams Canyon	Peach Springs	Total	Key Characteristics	Number Required	Region			Area Referral
						Direct	DC-VP	CHS*	
Inpatient Surgery	185	42	227	Inpatient ORs	0.2	227			* All workload referred for consideration at the Area CHS level was re-assigned to a CHS Delivery Option at the PSA level.
Surgical Case Total	871	207	1,078		0.7	1,078		0	
Additional Services									
Hostel Services	0	0	0	# of FTE				X	Provide for Admitted Patient Family Members



Area Referral Plan

The Area Referral Requirements and Delivery Plan identify workload referred from a region to an Area-wide direct care facility for support. Referral to the Area means the workload has already been considered at the Regional Level. Referral to the Area implies that the contributing region would rather have the need be met by an Area Direct Care Facility then by the Contract Health System and its dollars. Historically the Area Direct Care Facility has been Phoenix Indian Medical Center.

The spreadsheet that follows identifies referred workload by region and product line. The referred workload is summed in the "Total" column in the center of the page. The number of Key Characteristics required to meet that workload is identified. The Delivery Options indicates whether the workload can be met at the Area level or whether it needs to be met through contract health dollars at a Primary Service Area level.

It is not necessary to meet this referred workload at Phoenix Indian Medical Center, It is however important for economy of scale that this workload be met at a location where the services already are provided if possible.

Consistent with the strategic intent of this plan (care closer to home), the majority of Tribes and Service Unit have referred little workload to be met at the Area Direct Care Facility. They have instead projected that contract health dollars be used to meet these workloads and intend to pursue contract health dollars to meet their needs. The Area Direct Care facility will primarily serve the Phoenix Region, with Surgical support provided Parker and Visiting professionals provided to all of Arizona and Utah.



Intentionally Blank



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option

Area Population **161,815**

	Referred Region Workload												Delivery Options							
Discipline	Phoenix	Whiteriver	Nortnen Arizona	Colorado River System	San Carlos	Northwest Nevada	Northeastern Nevada	Central Nevada	Southern Nevada	Southwest Utah	Northeast Utah	Northwest Utah	Total	Key Characteristics	Number Required	Region			Delivery Options	
																Direct	DC-VP	CHS	Area Referral	Other Options or Remarks
Specialty Care																				
Specialty Care examines, diagnoses, and treats diseases and injuries requiring specialized capabilities diagnosis and procedures beyond the Primary Care team. The service typically is provided by visiting providers who have established clinic hours for consistent referral patterns.																				
Orthopedics	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
Ophthalmology	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
Dermatology	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
General Surgery	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
Otolaryngology	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
Cardiology	1,475	0	0	0	0	0	0			0	0	1,475		Providers	0.7	1,475		Viable When Grouped with Visiting Professional		
Urology	2,397	0	0	0	0	0	0			0	0	2,397		Providers	0.9	2,397		Viable When Grouped with Visiting Professional		
Neurology	2,490	0	0	0	0	0	0			0	0	2,490		Providers	1.3	2,490		Viable When Grouped with Visiting Professional		
Other Subspecialties	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
Nephrology	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
Allergy	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
Pulmonology	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
Gerontology	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
Gastroenterology	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
Rheumatology	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
Oncology	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
Pediatric-Genetics	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
Traditional Healing	0	0	0	0	0	0	0			0	0	0		Providers	0.0					
Specialty Care Sub-Total														Exam Rooms	0.0					
Inpatient Care																				
Labor & Delivery Births	0	0	0	0	27	0	0			0	0	27		LDRs	0.0	27		@ PIMC		
Obstetrics Patient Days	0	0	0	0	67	0	0			0	0	67		# of Beds	0.9	67		@ PIMC		
Obstetrics provides for specialized care, treatment, and consultative evaluation to eligible inpatients; provides antepartum, delivery, and postpartum care to maternity patients; and has responsibility for the operation and maintenance of the labor and delivery suite. The labor and delivery suite provides labor and delivery care by specially trained personnel to eligible patients, including prenatal care during labor, assistance during delivery, post-natal are, and minor gynecological surgery, if it is performed in the suite. Additional activities may include preparing sterile set-ups for deliveries; preparing patients for transportation to the delivery suite and the post-anesthesia.																				
Neonatology Patient Days	0	0	0	0	68	0	0			0	0	68		# of Bassinets	0.9	68		@ PIMC		
The Newborn Nursery provides specialized inpatient care, treatment, and consultative evaluation of newborn infants; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of the newborn, including those born prematurely; and provides for, or otherwise ensures, appropriate diagnostic evaluatioin and care of all inpatient in the neonatal age group; prepares medical records; and submits required reports.																				
Pediatric Patient Days	0	0	0	0	4	0	0			0	0	4		# of Beds	0.2	4		@ PIMC		
Pediatric Care provides specialized inpatient care, treatment, and consultative evaluation of infants, children, and adolescents; maintains close liaison with the other professional services; coordinates healthcare delivery relative the examination, diagnosis, treatment, and proper disposition of eligible patients; prepares medical records; and submits required repots.																				
Adult Medical Acute Care																				
Medical Care provides inpatient care and consultative evaluation in the medical specialties and subspecialties descpired in this section; coordinates healthcare delivery relative to the examination, diagnosis, treatement and proper disposition of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the medical care function will vary according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies.																				
Cardiology	0	0	0	6	14	0	0			0	0	21		# of Beds	-0.1	21		@ PIMC		
Endocrinology	0	0	0	33	5	0	0			0	0	38		# of Beds	-0.2	38		@ PIMC		
Gastroenterology	0	65	0	0	30	0	0			0	0	95		# of Beds	-0.4	95		@ PIMC		
General Medicine	0	0	0	0	0	0	0			0	0	0		# of Beds	0.0					
Hematology	0	0	0	0	0	0	0			0	0	0		# of Beds	0.0					
Nephrology	0	0	0	0	0	0	0			0	0	0		# of Beds	0.0					
Neurology	0	0	0	0	0	0	0			0	0	0		# of Beds	0.0					
Oncology	0	0	0	0	0	0	0			0	0	0		# of Beds	0.0					
Pulmonary	0	0	0	0	0	0	0			0	0	0		# of Beds	0.0					

Intentionally Blank



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option

Area Population 161,815

Discipline	Referred Region Workload												Delivery Options				
	Phoenix	Whiteriver	Nortnen Arizona	Colorado River System	San Carlos	Northwest Nevada	Northeastern Nevada	Central Nevada	Southern Nevada	Southwest Utah	Northeast Utah	Northwest Utah	Total	Key Characteristics	Number Required	Region	
																Direct	DC-VP
Rheumatology	0	0	0	0	0	0	0			0	0		0	# of Beds	0.0		
Unknown	0	0	0	52	0	0	0			0	0		52	# of Beds	-0.2		
Medical Patient Day Total	0	65	0	0	50	0	0			0	0	0	206		-0.8	154	0
Adult Surgical Acute Care																	
Surgical Care provides inpatient care and consultative evaluation in the surgical specialties and subspecialties described in this subsection; coordinates healthcare delivery relative to the examination, treatment, diagnosis, and proper dispositiion of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the surgical care function varies according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies.																	
Dentistry	0	0	0	0	33	0	0			0	0		33	# of Beds	0.3	33	
Dermatology	0	0	0	0	0	0	0			0	0		0	# of Beds	0.0	0	
General Surgery	0	0	0	0	8	0	0			0	0		8	# of Beds	0.1	8	
Gynecology	0	0	0	0	0	0	0			0	0		0	# of Beds	0.0	0	
Neurosurgery	0	0	0	0	33	0	0			0	0		33	# of Beds	0.3		33
Ophthalmology	0	0	0	0	0	0	0			0	0		0	# of Beds	0.0	0	
Orthopedics	0	0	0	0	17	0	0			0	0		17	# of Beds	0.2	17	
Otolaryngology	0	0	0	0	0	0	0			0	0		0	# of Beds	0.0	0	
Thoracic Surgery	0	0	0	0	7	0	0			0	0		7	# of Beds	0.1		7
Urology	0	0	0	0	12	0	0			0	0		12	# of Beds	0.1	12	
Vascular Surgery	0	0	0	0	33	0	0			0	0		33	# of Beds	0.3		33
Surgical Patient Day Total	0	0	0	0	144	0	0			0	0	0	144		1.4	70	0
Intensive Care Unit	0	0	0	0	0	0	0			0	0		0	# of Beds	0.0		
Intensive Care Units (ICUs) provides treatment for patients who require intensified, comprehensive observation and care because of shock, trauma, or other life-threatening conditions. they are staffed with specially trained personnel and contain monitoring equipment and other specialized support equipment for treating .																	
Psychiatry Patient Days	0	0	0	0	63	0	0			12	29		104	# of Beds	0.4	104	
Psychiatric Care provides specialized care and consultative evaluation for eligible inpatients; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of patients with psychotic, neurotic, or other mental disorders; maintains protective custody of patients with psychiatric disorders when required to prevent injury to themselves or to others; established therapeutic regimens; conducts individual or group therapy sessions; provides short-term treatment to patients psychologically or physically dependent upon alcohol or drugs; maintains custody of sensitive or medically privileged records and correspondence that evolve during treatment of patients; prepares medical records; and submits required reports.																	
Substance Abuse Patient	0	0	0	0	100	0	0			0	0		100	# of Beds	0.3	100	
Substance Abuse Care provides specialized care and consultative evaluation for eligible inpatients; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of patients psychologically or physically dependent upon alcohol or drugs; maintains protective custody of patients when required to prevent injury to themselves or to others; established therapeutic regimens; conducts individual or group therapy sessions; maintains custody of sensitive or medically privileged records and correspondence that evolve during treatment of patients; prepares medical records; and submits required reports.																	
Sub Acute / Transitional Care	706	0	120	485	0	X	0			0	0		1,310	# of Beds	4.5		
Inpatient Care Totals	706	65	120	485	497	0	0			12	29		2,004	# of Beds	7.8	568	0
Ancillary Services																	
Acute Dialysis	0	0	0	0	0	0	0			0	13		13	Rooms	0.0	13	
Acute Dialysis provides purification of the patient's blood using the patient's own peritoneal membrane, located in the abdomen, as the filter to remove excess water and toxins, while the patient is hospitalized. Specialty trained personnel teach all patients one family members through an intense training program how to perform these same functions in the home settings.																	
Diagnostic Imaging																	
Diagnostic Radiology provides diagnostic radiologic services to inpatients and outpatients. Activities include, but are not limited to, processing, examining, interpreting, storing, and retrieving radiographs and fluorographs; directing a radiological safety program; and consulting with physicians and patients.																	
Radiographic	0	0	0	0	0	0	0			0	0		0	Rooms	0.0		
Ultrasound	0	0	0	0	0	0	0			0	0		0	Rooms	0.0		
Mammography	0	0	0	0	0	0	0			0	0		0	Rooms	0.0		
Fluoroscopy	0	0	0	0	0	0	0			0	0		0	Rooms	0.0		
CT	0	0	0	0	0	0	0			0	0		0	Rooms	0.0		
MRI	0	0	0	0	0	0	0			0	0		0	Rooms	0.0		
Diagnostic Imaging Totals	0	0	0	0	0	0	0			0	0		0	Radiologist	0.0		

Intentionally Blank



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option

Area Population 161,815

Discipline	Referred Region Workload												Delivery Options			
	Phoenix	Whiteriver	Nortnen Arizona	Colorado River System	San Carlos	Northwest Nevada	Northeastern Nevada	Central Nevada	Southern Nevada	Southwest Utah	Northeast Utah	Northwest Utah	Total	Key Characteristics	Number Required	Region
Nuclear Medicine	0	0	0	0	320	0	0			54	0		373	Rooms	0.2	373
Nuclear Medicine provides diagnostic nuclear medicine studies, interprets such studies, and perorms therapeutic nuclear medicine treatment through the use of injectable or ingestible radioactive isotopes in conformance with licensure regulations. Functions and activities of the work center include, but are not limited to, performing clinical investigative studies, providing whole blood counting, evaluating patients suspected of being contaminated with gamma-emitting radio nuclides, consulting with patients and attending physicians, and maintaining radioactive waste disposal and storage of radioactive materials.																
Rad. Oncology	0	0	0	X	0	0	0			0	0		0	Rooms	0.0	
Chemotherapy	0	0	0	0	7	0	0			0	0		7	Rooms	0.0	7
Rehabilitation Services																
Rehabilitation Services develops, coordinates, and uses special knowledge and skills in planning, organizing, and managing programs for the care of inpatients and outpatients whose ability to function is impaired or threatened by disease or injury and incorporates activities such as: direct patient care, evaluation, testing, consultation, counseling, teaching, administration, research, and community services. This service typically consists of three disciplines: Physical Therapy, Occupational Therapy, and Speech Therapy.																
Rehab Total	0	0	0	19,441	0	0	0			0	0		0	Therapy FTE	0.0	
Respiratory Therapy	0	0	0	0	0	0	0			0	0		0	Therapy FTE	0.0	0
Respiratory Therapy provides administers oxygen, humidification, aerosol, and certain potent drugs through inhalation or positive pressure and provides other forms of rehabilitative therapy including initiating, monitoring, and evaluating patient performance and reactions to therapy and performing blood gas analysis. The service also tests and evaluates the patient's ability to exchange oxygen and other gases through measurement of inhaled and exhaled gases and analysis of blood.																
Outpatient Surgery Cases																
Cardiovascular	0	0	0	66	11	0	0			0	0		77	Outpatient ORs	0.1	77
Digestive	0	0	0	0	0	0	0			0	0		0	Outpatient ORs	0.0	0
Endocrine	0	0	0	34	0	0	0			0	0		34	Outpatient ORs	0.0	34
ENT	0	0	0	23	0	0	0			0	0		23	Outpatient ORs	0.0	23
Gynecology	0	0	0	1	0	0	0			0	0		1	Outpatient ORs	0.0	1
Hemic and Lymphatic	0	0	0	26	0	0	0			0	0		26	Outpatient ORs	0.0	26
Integument	0	0	0	42	0	0	0			0	0		42	Outpatient ORs	0.0	42
Musculoskeletal	0	0	0	0	0	0	0			0	0		0	Outpatient ORs	0.0	0
Nervous	0	0	0	23	31	0	0			0	0		54	Outpatient ORs	0.0	54
Ocular	0	0	0	4	0	0	0			0	0		4	Outpatient ORs	0.0	4
Respiratory	0	0	0	17	0	0	0			0	0		17	Outpatient ORs	0.0	17
Urogenital	0	0	0	25	0	0	0			0	0		25	Outpatient ORs	0.0	25
Endoscopy	0	0	0	236	0	0	0			0	0		236	Outpatient ORs	0.1	236
OP Surgical Case Total	0	0	0	6	0	0	0			0	0			Outpatient ORs	0.3	
Inpatient Surgery Cases	0	0	0	243	0	0	0			0	0		243	Inpatient ORs	0.2	243
Surgical Case Total	0	0	0	0	0	0	0			0	0		0		0.5	
Preventative Care																
Health Promotion / Disease Prevention																
Epidemiology	0	0	0	0	X	0	0			0	0		0	# of FTE	0.0	X
Additional Services																
Hostel Services	0	0	0	0	0	0	0			0	0		0	# of FTE	0.0	X
Community Health representative inform community mebers about available health services, make referrals to appropriate agencies, and assist PHN staff with basic health care screening. Also, to participate in health promotion activities, and health fairs.																
															Should Support Colorado River, San Carlos Inpatient's Family Members	

Intentionally Blank



Master Plan Priorities

Overview

Resources for capital and operational expenditures are consistently limited, clear priorities are necessary for the development of a reasonable, supportable and attainable master plan. Clear priorities are arrived at through the consistent application of mutually agreed upon criteria reflecting the concerns and support of all interested parties whom the master plan will impact. For the Phoenix Area, these priorities were therefore necessarily based on tribally led/developed objective criteria. The definition, refinement and agreement on such criteria occurred throughout the course of ongoing Phoenix Area Health Services Master Plan meetings. The conversations highlighted below are those discussions primarily devoted to priority/criteria development.

First Meeting - July 2001

In order to gain consensus on what is important, and to pursue that goal united, master plan task force members were asked to work together in defining how priorities should be established. They were asked to develop such priorities with an "area wide leadership hat" on, so the needs/concerns of all would be represented. In order to understand the concerns of the group and to understand what the group thought was important, the group was asked to respond to the following question:

What characteristics of a service area should dictate their level of priority relative to future capital expenditures?

The following four groupings summarize the task force's initial response of what characterizes a priority service area within the Area.

<u>Access</u>	<u>Patient</u>	<u>Geography</u>	<u>Patient Payor Profile</u>
Access within 30 minutes.	Low Health Status.	Remote.	Level of Need Funding.
Access to 24 hours 7 days a week care.	Prevalence of Disease.	Urban Indian Impact Study.	Projected CHS Need.
Access to Primary Care.	Negative Lifestyles.	On Reservation.	Medicaid.
Scheduled Appointment Availability.	Projected Public Health Services.	Urban Area.	Medicare.
No Alternative Care.	Urban Indian Health.	Distance to Tertiary Care.	Percent of Uninsured.
	Chronic Diseases.	Specialty Care within 250 miles.	
	Increasing Population.		
	Age.		
	Mobile Young Population.		
	Projected Direct Care Needs.		
	Tribal Health Level.		

After further thought and discussions within the context of Service Area site visits and prior to the second meeting in November 2001, the initial responses were further refined to allow grouping by criteria in bold, with possible measurable criteria factors in the form of bullets beneath each heading:





- | | |
|--|---|
| <ul style="list-style-type: none"> • Health <ul style="list-style-type: none"> ○ Disease Prevalence ○ Negative Lifestyles ○ Low Health Status ○ Chronic Diseases • Access <ul style="list-style-type: none"> ○ Distance to tertiary care ○ Access to Specialty Care ○ Primary Care access within 30 minutes ○ Access to ER | <ul style="list-style-type: none"> • Resources <ul style="list-style-type: none"> ○ Space Capacity ○ Age of Pop ○ Pop Growth ○ Scheduling Availability ○ Primary Care Capacity • Payor Profile <ul style="list-style-type: none"> ○ Level of Need Funding ○ % Of Uninsured ○ % Of Non-CHS eligible ○ Reservation-based |
|--|---|

Second Meeting (November 7-8, 2001)

During the November meeting, the task force members broke into two groups in order to finalize the Criteria's measurable factors. The Criteria and its measurable factors are used to complete a criteria-ranking equation for each Service Area. The ranking equation will allow the task force to identify a priority Service Area within the Phoenix Area. While all Service Areas have needs, this priority exercise will identify what community according to the task force's criteria should be addressed first. The use of the equation will remove the politicizing of priorities from the process. Based on the earlier conversations, the four criteria are Access, Health, Resource and Patient Profile. The ranking equation is:

$$(A*Aw) + (H*Hw) + (R*Rw) + (P*Pw) = \text{Rank}$$

Where;

- A = Access Score
- H = Health Score
- R = Resource Score
- P = Patient Profile Score
- w = Weighted Priority (assigned to each criteria as follows)

A criteria's score will be dependent upon the measurable factors determined by the group. While the criteria's weighting is determined by the groups overall perception as to the importance of that criteria to priority. That importance is determined by assigning a percentage (out of 100%) to each of the criteria's.

The criteria's score works in a similar way. For example, if four factors affect "Access", individual task force team members would be able to assign a percentage importance to each factor. These individual understandings are then averaged to create a weighting of each measurable factor affecting the Criteria's score. Task force members' assignment of importance to the four factors may differ greatly. However, the input of all task force members through such a vehicle facilitates a fair way to score each criterion's importance, ensuring every task force member has equal and discreet input.

Criteria factors are specific measurable indicators, which will allow each PSA to be evaluated/scored for each criterion. In order to narrow the effort at the second meeting each group developing the Criteria's measurable factors were given the following rules:

- There would be three measurable factors for each criteria
- The factors would allow each Criteria to be isolated – "all else being equal", that Service Area's "Health" is a priority because _____
- It would be measurable by objective means, by passing through the following tests:
 - Is it attainable? (Pass = yes)
 - Is it a reliable comparison? Can you trust its result? (Pass = yes)





- Can it be gamed? (Pass = no)

Fourth Meeting (January 24 and 25th)

The factor rules, as developed above, resulted in the following factors and scoring mechanism for each Criterion. The goal of the priority discussions at the fourth meeting was to review these factors and have the group weight both the factors and the criteria.

Health

Criteria Factor	Scoring Criteria
Behavioral Health Rate	1 – Lowest 3 rd
	2 – Middle 3 rd
	3 – Highest 3 rd of the (SMI rate + Drug and Alcohol Arrest rate + Suicide Rate)
Disease Prevalence	1 – Lowest 3 rd
	2 – Middle 3 rd
	3 – Highest 3 rd of Disease Prevalence. Disease Prevalence = Incidences of Diabetes, Cardiovascular, Respiratory, Cancer, Arthritis + Injury divided by User Population.
Mortality – Age Adjusted Rate	1 – Highest 3 rd
	2 – Middle 3 rd
	3 – Lowest 3 rd of the Age Adjusted Mortality Rate

Access

Criteria Factor	Scoring Criteria
ER Access	1 – IHS ER < 60 minutes
	2 – Non-Direct Care ER < 60 minutes
	3 – No ER or No EMS < 60 minutes
L & D Access	1 – IHS L & D Service < 60 minutes
	2 – No Direct Care L & D < 60 minutes
	3 – No L & D Service < 60 minutes
Availability of Primary Care Services	1 – Top third of Provider Utilization Rate
	2 – Mid third of Provider Utilization Rate
	3 – Low 3 rd of Provider Utilization Rate





Resources

Criteria Factor	Scoring Criteria
% Of Required Space	1 – Highest 3 rd
	2 – Middle 3 rd
	3 – Lowest 3 rd of required space – Total IHS and 638 supported functions Square Meters divided by required square meters calculation.
Facility Condition	1 – Lowest 3 rd
	2 – Middle 3 rd
	3 – Highest 3 rd of Facility Weighted Age – (Sum of Facility(s) size x Age(s)) divided by total facility(s) size.
Capacity	1 – Highest 3 rd
	2 – Middle 3 rd
	3 – Lowest 3 rd of Primary Care Capacity % - (Actual # of PC Exam Rooms / Required # of PC Exam Rooms) + (Actual PC Square Meters / Required PC Square Meters) / 2.

Payor Profile

Criteria Factor	Scoring Criteria
CHS Dependency	1 – Lowest 3 rd
	2 – Middle 3 rd
	3 – Highest 3 rd of CHS Dependency – CHS \$/User Population.
Non-Billable Provider Visits	1 – Lowest 3 rd
	2 – Middle 3 rd
	3 – Highest 3 rd of Non-Billable Provider Visit Rate – Non-Billable insured visits + non-insured visits divided by the user population.
Non-CHS Eligible Provider Visits	1 – Lowest 3 rd
	2 – Middle 3 rd
	3 – Highest 3 rd of Non-CHS Provider Visit Rate – Non-CHS Provider Visits divided by the user population.

This resulted in task force members being able to assign weighting by ballot according to the following expanded formula.

The Primary Service Area's Priority Score equals the following:

Health Criteria - the weighted percentage importance of the following Health criteria factors:

Behavioral Health Rate ----- (% out of 100%)
 Chronic Disease Prevalence ----- (% out of 100%)
 Mortality-Age Adjusted Rate ----- (% out of 100%)

Plus (+)

Access Criteria - the weighted percentage importance of the following Access criteria factors:

ER Access ----- (% out of 100%)
 L & D Access ----- (% out of 100%)
 Availability of PC Services ----- (% out of 100%)

Plus (+)





Resources Criteria - the weighted percentage importance of the following Resources criteria factors:

Percentage of Required Space -----(% out of 100%)
Facility Condition -----(% out of 100%)
Capacity -----(% out of 100%)

Plus (+)

Payor Profile Criteria - the weighted percentage importance of the following Payor Profile criteria factors:

CHS Dependency-----(% out of 100%)
Non-Billable Provider Visits-----(% out of 100%)
Non-CHS Eligible Provider Visits -----(% out of 100%)

The following page shows this expanded formula as a ballot, which the team members used to weight criteria and assign priority.





PSA Score = (A*Aw) + (H*Hw) + (R*Rw) + P*Pw

The sum must equal 100

H=Health		Behavioral Health Rate	
		Chronic Disease Prevalence	+
		Mortality-Age Adjusted Rate	+
		Total =	

+

A=Access		ER Access	
		L&D Access	+
		Availability of PC Services	+
		Total =	

+

R=Resources		% of Required Space	
		Facility Condition	+
		Capacity	+
		Total =	

+

P=Payer Profile		CHS Dependency	
		Non-Billable Provider Visits	+
		Non-CHS Eligible Provider Visit	+
		Total =	

Total	100
-------	-----

Name	
------	--

The sum must equal 100

The priorities for the Phoenix Area are ranked as follows:

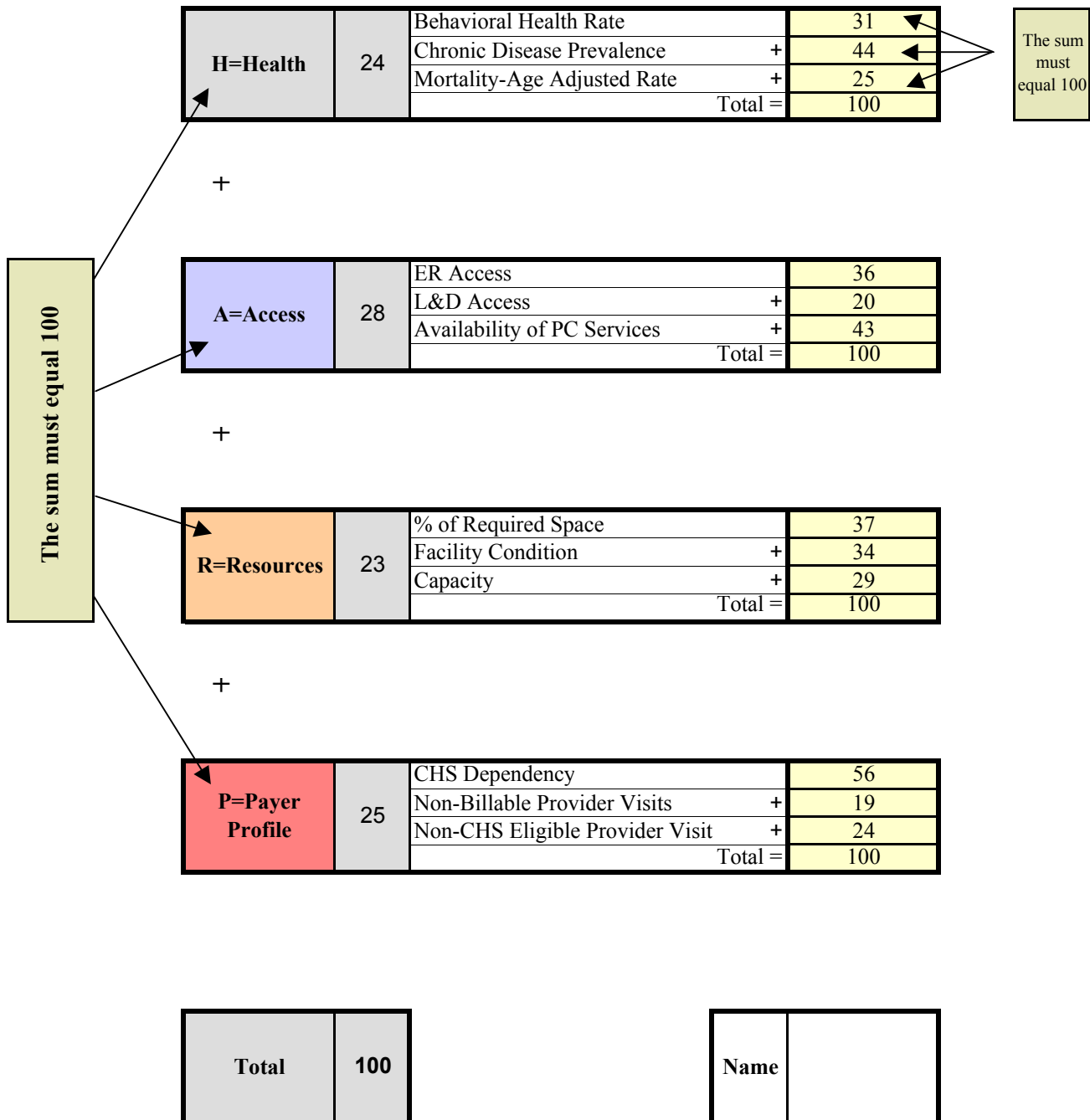
Criteria	Rank	Score	Possible Score
Access	1	28	100
Payor Profile	2	25	100
Health	3	24	100
Resources	4	23	100

The final ballot results indicating the weighting of both criteria and each criterion's factors and the supporting source ballot page follow:





$$\text{PSA Score} = (A * A_w) + (H * H_w) + (R * R_w) + P * P_w$$



Intentionally Blank



Priority Weighting Ballot Source

	Participant																																
Criteria	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	Average	
Health	20	20	50	10	25	25	40	35	40	30	25	10	50	30	25	25	40	30	25	20	25	10	20	15	15	10	15	10	15	15	15	24	
Behavioral Health Rate	30	25	40	50	30	30	33.33	50	33.3	10	33.33	20	20	50	30	20	30	30	30	20	25	15	40	50	50	20	10	30	20	50	25	31	
Chronic Disease Prevalence	50	50	50	25	40	50	33.33	25	33.3	60	33.33	20	50	40	50	70	40	40	50	50	50	40	40	40	40	50	60	40	60	40	50	44	
Mortality-Age Adjusted Rate	20	25	10	25	30	20	33.33	25	33.3	30	33.33	60	30	10	20	10	30	30	20	30	25	45	20	10	10	30	30	30	20	10	25	25	
Total	100	100	100	100	100	100	99.99	100	99.9	100	99.99	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	
Access	20	20	10	45	25	25	30	35	30	30	25	20	30	40	25	25	20	30	25	20	50	40	20	30	30	10	45	30	30	30	30	28	
ER Access	33.33	33.33	15	25	20	30	50	50	50	33	33.33	40	20	40	20	40	40	34	30	90	75	30	33.33	20	20	90	25	40	20	20	30	36	
L&D Access	33.33	33.33	15	5	10	20	25	25	25	33	33.33	20	20	20	20	20	30	33	30	10	15	20	33.33	10	10	10	5	20	10	10	30	20	
Availability of PC Services	33.33	33.33	70	70	70	50	25	25	25	34	33.33	40	60	40	60	40	30	33	40	0	10	50	33.33	70	70	0	70	40	70	70	40	43	
Total	99.99	99.99	100	100	100	100	100	100	100	100	99.99	100	100	100	100	100	100	100	100	100	100	100	99.99	100	100	100	100	100	100	100	100	100	
Resources	10	10	30	35	25	25	5	5	5	10	25	35	10	10	25	35	20	20	25	10	15	20	15	40	40	40	35	15	40	40	40	23	
% of Required Space	33.33	50	20	60	25	34	50	50	50	15	33.33	40	20	35	30	50	60	30	30	50	25	15	40	50	50	50	20	40	25	50	20	37	
Facility Condition	33.33	25	20	20	50	33	40	25	40	70	33.33	30	20	35	50	25	20	30	50	40	50	15	40	25	25	40	10	20	50	25	60	34	
Capacity	33.33	25	60	20	25	33	10	25	10	15	33.33	30	60	30	20	25	20	40	20	10	25	70	20	25	25	10	70	40	25	25	20	29	
Total	99.99	100	100	100	100	100	100	100	100	100	99.99	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	
Payor Profile	50	50	10	10	25	25	25	25	25	30	25	35	10	20	25	15	20	20	25	50	10	30	45	15	15	40	5	45	15	15	15	25	
CHS Dependency	50	50	45	50	60	50	75	75	75	80	33.33	80	60	30	20	40	70	40	20	100	80	60	80	40	40	100	33	90	40	40	40	56	
Non-Billable Provider Visits	25	25	20	25	20	25	12.5	12.5	12.5	10	33.33	10	20	30	40	10	15	30	30	0	10	10	10	20	20	0	33	5	20	20	50	19	
Non-CHS Eligible Provider Visits	25	25	35	25	20	25	12.5	12.5	12.5	10	33.33	10	20	40	40	50	15	30	50	0	10	30	10	40	40	0	33	5	40	40	10	24	
Total	100	100	100	100	100	100	100	100	100	100	99.99	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	99	100	100	100	100	100	
Grand Total	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100		

Intentionally Blank



On the opposite page, the end result priorities are as indicated. The following pages indicate each PSAs score and data relative to each Criteria and Factor.

The final ranking formula is as follows:

$$\text{Rank} = ((Aw)((AF_1*AF_1w)+(AF_2*AF_2w)+(AF_3*AF_3w))/3)) + ((Hw)((HF_1*HF_1w)+(HF_2*HF_2w)+(HF_3*HF_3w))/3)) + ((Rw)((RF_1*RF_1w)+(RF_2*RF_2w)+(RF_3*RF_3w))/3)) + ((Pw)((PF_1*PF_1w)+(PF_2*PF_2w)+(PF_3*PF_3w))/3))/4$$

Where;
A = Access
R = Resource
H = Health
P = Patient Profile
w = Weighted Priority (assigned to each criteria as follows)
F₁ = Criteria Factor 1, etc.

The formula with the weighting factors as determined is as follows:

$$\text{Rank} = ((.28)((AF_1*.36)+(AF_2*.20)+(AF_3*.43))/3)) + ((.24)((HF_1*.31)+(HF_2*.44)+(HF_3*.25))/3)) + ((.23)((RF_1*.37)+(RF_2*.34)+(RF_3*.29))/3)) + ((.25)((PF_1*.56)+(PF_2*.19)+(PF_3*.24))/3))/4$$

Two developments to the criteria factors were necessary to complete the rankings.

- The Alcohol and Drug Arrest Rate by community, tribe or Primary Service Area was not readily available. In its place, diagnosis codes reflecting drug and alcohol issues were processed by Service Unit from existing 1999 and 2000 health care data was processed to determine the prevalence of these diagnosis within a service unit. During this time period the total number of unique users with one of these diagnosis was counted and compared to the accepted 1998 Service Population for each Service Unit.
- The intention had been to understand what percentage of provider visits were not billable either due to no third party payor or an insurance (schools) which has an agreement not to pay IHS. While patients without 3rd Party payors is identifiable within the data set, specific insurances is not available within the data set. Thus the percentage indicated for the priority system reflects only those visits with no 3rd party payor available.

In accordance with our Ranking system, the Service Areas with the highest priority relative to;

- Access is Goshute
- Health is shared between San Carlos, West End, Bylas, and Ak-Chin
- Resources is San Carlos
- Patient Payor Profile is shared between Las Vegas, PITU, and Skull Valley
- And overall is PITU





Summary Scorecard

Factor Weighting	Factors				Composite Score	Summary Rank
	28%	24%	23%	25%		
Service Area	Access Criteria	Health Criteria	Resource Criteria	Payor Criteria		
Phoenix	47	65	88	80	17	11
Hu-Hu-Kam	33	90	54	55	14	25
Whiteriver	47	77	76	47	15	19
Keams Canyon	75	42	65	39	14	26
San Carlos	40	100	100	52	18	9
West End	62	100	90	39	18	5
Salt River	47	75	76	39	15	23
Ft. Duchesne	66	75	88	91	20	3
Parker	40	92	68	93	18	6
Ft. Yuma	40	90	88	74	18	8
Reno/Sparks	66	33	69	68	15	22
Washoe	66	33	68	93	16	16
Bylas	40	100	46	52	15	24
Elko	66	81	57	72	17	10
Duck Valley	46	81	66	72	16	14
Peach Springs	52	92	43	78	16	13
Fallon	66	33	33	86	14	27
Cibecue	33	77	45	33	12	36
Pyramid Lake	78	33	45	85	15	18
Ft. Mohave	80	92	0	60	15	21
Walker River	66	33	56	60	14	29
Las Vegas	80	33	0	99	14	28
Ft. McDowell	33	75	33	33	11	38
Yerington	66	33	46	60	13	32
Middle Verde	80	75	68	62	18	7
PITU	80	75	89	99	21	1
San Lucy	66	75	89	47	17	12
Ak-Chin	33	100	0	33	10	40
McDermitt	52	33	0	77	10	39
Supai	70	83	0	83	15	20
Prescott	80	67	0	62	13	30
Ely	66	81	54	91	18	4
Moapa	80	33	0	85	13	33
Chemehuevi	40	83	0	72	12	35
Winnemucca	80	33	0	80	13	34
Duckwater	80	92	79	77	20	2
Payson	80	67	0	62	13	30
Goshute	99	92	0	58	16	17
Kaibab	66	42	0	33	9	41
Tonopah	80	33	0	60	11	37
Skull Valley	80	75	0	99	16	15





Access Criteria Scorecard

Factor Weighting	Factors				Access Score
	36	20	Provider Utilization Rate (P.U.R.)	43	
Service Area	ER Access	L & D Access		PUR Score	
Phoenix	1	1	2.84	2	47
Hu-Hu-Kam	1	1	4.35	1	33
Whiteriver	1	1	4.24	2	47
Keams Canyon	1	3	1.75	3	75
San Carlos	1	2	5.37	1	40
West End	1	1	2.43	3	62
Salt River	1	1	4.07	2	47
Ft. Duchesne	2	2	2.70	2	66
Parker	1	2	6.69	1	40
Ft. Yuma	1	2	4.44	1	40
Reno/Sparks	2	2	3.18	2	66
Washoe	2	2	3.11	2	66
Bylas	1	2	4.92	1	40
Elko	2	2	2.92	2	66
Duck Valley	1	3	4.88	1	46
Peach Springs	2	2	6.00	1	52
Fallon	2	2	3.09	2	66
Cibecue	1	1	6.00	1	33
Pyramid Lake	3	2	3.66	2	78
Ft. Mohave	2	2	1.30	3	80
Walker River	2	2	4.22	2	66
Las Vegas	2	2	1.09	3	80
Ft. McDowell	1	1	4.65	1	33
Yerington	2	2	3.67	2	66
Middle Verde	2	2	1.44	3	80
PITU	2	2	0.14	3	80
San Lucy	2	2	2.70	2	66
Ak-Chin	1	1	6.02	1	33
McDermitt	2	2	5.15	1	52
Supai	3	3	7.16	1	70
Prescott	2	2	1.85	3	80
Ely	2	2	3.22	2	66
Moapa	2	2	2.02	3	80
Chemehuevi	1	2	6.30	1	40
Winnemucca	2	2	2.68	3	80
Duckwater	2	2	1.22	3	80
Payson	2	2	1.79	3	80
Goshute	3	3	2.21	3	99
Kaibab	2	2	2.75	2	66
Tonopah	2	2	1.10	3	80
Skull Valley	2	2	1.58	3	80





Health Criteria Scorecard

Factor Weighing		Behavioral Health					Disease Prevalence		Mortality		Health Score
Service Area	1997 User Pop	31					44		25		
		SMI Score	D&A Score	Suicide Score	Behavioral Health Composite Score	Total Score	Chronic Disease Incidence Composite Score	Score	Mortality - Age Adjusted Rate	Score	
Phoenix	41,173	3	6	1	10.0	1	4	2	716.5	3	65
Hu-Hu-Kam	14,263	5	7	4	16.0	2	7	3	962.8	3	90
Whiteriver	13,384	2	8	10	20.0	3	5	2	663.6	2	77
Keams Canyon	9,716	1	3	5	9.0	1	1	1	606.8	2	42
San Carlos	9,008	8	10	9	27.0	3	8	3	730.6	3	100
West End	4,820	5	7	9	21.0	3	7	3	962.8	3	100
Salt River	4,760	3	6	1	10.0	2	4	2	716.5	3	75
Ft. Duchesne	4,738	6	1	7	14.0	2	3	2	815.4	3	75
Parker	3,735	9	9	8	26.0	3	8	3	567.9	2	92
Ft. Yuma	3,676	10	4	2	16.0	2	10	3	1,002.5	3	90
Reno/Sparks	3,314	4	2	3	9.0	1	1	1	516.6	1	33
Washoe	2,554	4	2	3	9.0	1	1	1	516.6	1	33
Bylas	2,161	8	10	9	27.0	3	8	3	730.6	3	100
Elko	2,064	7	5	6	18.0	2	6	3	703.9	2	81
Duck Valley	2,029	7	5	6	18.0	2	6	3	703.9	2	81
Peach Springs	1,918	9	9	8	26.0	3	8	3	567.9	2	92
Fallon	1,701	4	2	3	9.0	1	1	1	516.6	1	33
Cibecue	1,699	2	8	10	20.0	3	5	2	663.6	2	77
Pyramid Lake	1,562	4	2	3	9.0	1	1	1	516.6	1	33
Ft. Mohave	1,147	9	9	8	26.0	3	8	3	567.9	2	92
Walker River	1,047	4	2	3	9.0	1	1	1	516.6	1	33
Las Vegas	931	4	2	3	9.0	1	1	1	516.6	1	33
Ft. McDowell	722	3	6	1	10.0	2	4	2	716.5	3	75
Yerington	702	4	2	3	9.0	1	1	1	516.6	1	33
Middle Verde	640	3	6	1	10.0	2	4	2	716.5	3	75
PITU	625	6	1	7	14.0	2	3	2	815.4	3	75
San Lucy	620	3	6	1	10.0	2	4	2	716.5	3	75
Ak-Chin	608	8	7	4	19.0	3	7	3	962.8	3	100
McDermitt	603	4	2	3	9.0	1	1	1	516.6	1	33
Supai	495	9	9	8	26.0	3	8	3	567.9	1	83
Prescott	433	3	6	1	10.0	2	4	2	716.5	2	67
Ely	326	7	5	6	18.0	2	6	3	703.9	2	81
Moapa	282	4	2	3	9.0	1	1	1	516.6	1	33
Chemehuevi	215	9	9	8	26.0	3	8	3	567.9	1	83
Winnemucca	203	4	2	3	9.0	1	1	1	516.6	1	33
Duckwater	140	7	5	6	18.0	3	6	3	703.9	2	92
Payson	131	3	6	1	10.0	2	4	2	716.5	2	67
Goshute	121	7	5	6	18.0	3	6	3	703.9	2	92
Kaibab	102	1	3	5	9.0	1	1	1	606.8	2	42
Tonopah	49	4	2	3	9.0	1	1	1	516.6	1	33
Skull Valley	33	6	1	7	14.0	2	3	2	815.4	3	75





Health Criteria Supporting Detail

Chronic Disease Detail

Service Unit	1998 Service Pop	Diabetes Rank	Cardiovascular Incidence	Cardiovascular Rate	Rank 1-10 Cardiovascular	Respiratory Incidence	Respiratory Rate	Rank 1-10 Respiratory	Cancer Incidence	Cancer Rate	Rank 1-10 Cancer	Arthritis Incidence	Arthritis Rate	Rank 1-10 Arthritis	Injury Rank
Uintah & Ouray	7,088	2	83	0.0117	1	415	0.0585	2	12	0.0017	2	214	0.0302	4	9
Keams Canyon	7,425	6	185	0.0249	4	459	0.0618	3	14	0.0019	4	169	0.0228	1	1
Elko/Owyhee	3,986	5	140	0.0351	7	265	0.0665	4	7	0.0018	3	281	0.0705	10	8
Parker	7,100	8	267	0.0376	9	953	0.1342	9	27	0.0038	9	433	0.0610	9	2
Phoenix	48,880	3	823	0.0168	2	5,930	0.1213	7	125	0.0026	6	1,179	0.0241	2	7
Sacaton	18,157	10	590	0.0325	5	1,689	0.0930	5	56	0.0031	8	703	0.0387	7	4
San Carlos	10,368	7	384	0.0370	8	1,289	0.1243	8	59	0.0057	10	510	0.0492	8	5
Schurz	21,722	1	454	0.0209	3	762	0.0351	1	29	0.0013	1	602	0.0277	3	10
Whiteriver	13,357	4	462	0.0346	6	1,388	0.1039	6	27	0.0020	5	439	0.0329	5	3
Yuma	4,185	9	186	0.0444	10	626	0.1496	10	11	0.0026	7	159	0.0380	6	6

Behavioral Health Detail

Service Unit	1998 Service Pop	SMI Incidence	SMI Rate	Rank 1-10 SMI	Drug & Alcohol Incidence	Drug & Alcohol Rate	Rank 1-10 Drug & Alcohol	Suicide Incidence	Suicide Rate	Rank 1-10 Suicide
Uintah & Ouray	7,088	270	0.0381	6	215	0.0303	1	222	0.0313	7
Keams Canyon	7,425	144	0.0194	1	274	0.0369	3	143	0.0193	5
Elko/Owyhee	3,986	166	0.0416	7	189	0.0474	5	88	0.0221	6
Parker	7,100	351	0.0494	9	619	0.0872	9	225	0.0317	8
Phoenix	48,880	1,467	0.0300	3	2442	0.0500	6	174	0.0036	1
Sacaton	18,157	667	0.0367	5	1485	0.0818	7	295	0.0162	4
San Carlos	10,368	454	0.0438	8	1167	0.1126	10	345	0.0333	9
Schurz	21,722	706	0.0325	4	682	0.0314	2	186	0.0086	3
Whiteriver	13,357	301	0.0225	2	1150	0.0861	8	520	0.0389	10
Yuma	4,185	211	0.0504	10	172	0.0411	4	33	0.0079	2





Resource Criteria Scorecard

Factor Weighting	Factors						Resource Score
	37		34		29		
	% of Required Space	Score	Facility Weighted Age	Score	% Capacity	Score	
Service Area							
Phoenix	32.1%	2	30	3	21.5%	3	88
Hu-Hu-Kam	117.6%	1	15	2	82.4%	2	54
Whiteriver	46.9%	2	21	2	35.9%	3	76
Keams Canyon	63.6%	2	6	1	22.7%	3	65
San Carlos	30.3%	3	36	3	25.9%	3	100
West End	7.2%	3	32	3	61.8%	2	90
Salt River	35.9%	2	8	2	20.1%	3	76
Ft. Duchesne	33.1%	2	25	3	55.9%	3	88
Parker	18.0%	3	1	1	95.9%	2	68
Ft. Yuma	42.1%	2	62	3	49.4%	3	88
Reno/Sparks	29.1%	3	16	2	174.9%	1	69
Washoe	19.2%	3	In Construction	1	67.1%	2	68
Bylas	38.1%	2	6	1	113.4%	1	46
Elko	32.7%	2	10	2	114.0%	1	57
Duck Valley	807.7%	1	23	3	106.7%	2	66
Peach Springs	229.1%	1	In Construction	1	108.8%	2	43
Fallon	729.7%	1	6	1	134.6%	1	33
Cibecue	727.8%	1	8	2	156.5%	1	45
Pyramid Lake	65.3%	1	15	2	266.4%	1	45
Ft. Mohave	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown	0
Walker River	101.5%	1	59	3	112.7%	1	56
Las Vegas	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown	0
Ft. McDowell	128.6%	1	6	1	124.3%	1	33
Yerington	33.5%	2	7	1	126.0%	1	46
Middle Verde	18.7%	3	2	1	100.0%	2	68
PITU	10.5%	3	Lease Space	2	0.0%	3	89
San Lucy	0.0%	3	Lease Space	2	0.0%	3	89
Ak-Chin	Unknown	Unknown	61	3	Unknown	Unknown	0
McDermitt	Unknown	Unknown	25	3	Unknown	Unknown	0
Supai	Unknown	Unknown	30	3	Unknown	Unknown	0
Prescott	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown	0
Ely	68.1%	1	8	2	100.0%	2	54
Moapa	Unknown	Unknown	26	3	Unknown	Unknown	0
Chemehuevi	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown	0
Winnemucca	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown	0
Duckwater	13.1%	3	8	2	63.0%	2	79
Payson	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown	0
Goshute	Unknown	Unknown	6	1	Unknown	Unknown	0
Kaibab	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown	0
Tonopah	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown	0
Skull Valley	Unknown	Unknown	Unknown	Unknown	Unknown	Unknown	0





Patient Profile Criteria Scorecard

	Factors						
Factor Weighting	56		19		24		Payor Profile Score
Service Area	CHS \$ / User	Score	Non-Billable Provider Visit Rate	Score	Non-CHS Provider Visit Rate	Score	
Phoenix	\$648	2	56%	3	74%	3	80
Hu-Hu-Kam	\$619	1	40%	2	10%	3	55
Whiteriver	\$579	1	45%	2	3%	2	47
Keams Canyon	\$467	1	39%	2	2%	1	39
San Carlos	\$742	2	35%	1	2%	1	52
West End	\$619	1	43%	2	2%	1	39
Salt River	\$648	1	50%	2	1%	1	39
Ft. Duchesne	\$1,289	3	55%	3	6%	2	91
Parker	\$1,224	3	38%	2	8%	3	93
Ft. Yuma	\$739	2	38%	2	15%	3	74
Reno/Sparks	\$1,214	2	38%	1	23%	3	68
Washoe	\$1,663	3	48%	2	13%	3	93
Bylas	\$742	2	32%	1	0%	1	52
Elko	\$1,091	2	55%	3	8%	2	72
Duck Valley	\$694	2	57%	3	5%	2	72
Peach Springs	\$1,231	3	29%	1	7%	2	78
Fallon	\$1,407	3	37%	1	8%	3	86
Cibecue	\$579	1	36%	1	1%	1	33
Pyramid Lake	\$1,533	3	47%	2	3%	2	85
Ft. Mohave	\$1,224	2	38%	1	8%	2	60
Walker River	\$865	2	27%	1	2%	2	60
Las Vegas	\$1,440	3	65%	3	42%	3	99
Ft. McDowell	\$648	1	25%	1	2%	1	33
Yerington	\$1,141	2	29%	1	5%	2	60
Middle Verde	\$648	1	55%	3	28%	3	62
PITU	\$1,854	3	59%	3	41%	3	99
San Lucy	\$648	1	39%	2	4%	2	47
Ak-Chin	\$619	1	34%	1	1%	1	33
McDermitt	\$1,677	3	46%	2	1%	1	77
Supai	\$1,231	3	55%	3	1%	1	83
Prescott	\$648	1	56%	3	80%	3	62
Ely	\$2,218	3	65%	3	5%	2	91
Moapa	\$1,440	3	39%	2	4%	2	85
Chemehuevi	\$1,224	2	64%	3	2%	2	72
Winnemucca	\$865	2	68%	3	14%	3	80
Duckwater	\$2,218	3	50%	2	1%	1	77
Payson	\$648	1	54%	3	65%	3	62
Goshute	\$1,091	2	39%	2	1%	1	58
Kaibab	\$467	1	28%	1	2%	1	33
Tonopah	\$865	2	27%	1	2%	2	60
Skull Valley	\$1,289	3	100%	3	60%	3	99



Intentionally Blank